*Data Not Collected for 2015

Total Residents Diagnosed with Mental Illness 13

0

0

0

Other Medical Conditions

Non-Medical Conditions

TOTALS

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

0

0

1

CONTINUING CARE COMMUNITY

Reported Identified Offenders

LIFE CARE FACILITY

No Restrictions

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 20	15
Nursing Care	279	275	254	275	224	55	199	279	Residents on 1/1/2015	233
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	521
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	530
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	224
TOTAL BEDS	279	275	254	275	224	55	199	279	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Med Pat. davs	icare Occ. Pct.	Medio		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. davs	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	11,631	16.0%	54,781	53.8%	0	1,864	16,692	0	84,968	83.4%	84.7%
Skilled Under 22	•		0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	11,631	16.0%	54,781	53.8%	0	1,864	16,692	0	84,968	83.4%	84.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	0	0	0	0	1	0	1
45 to 59	3	6	0	0	0	0	0	0	3	6	9
60 to 64	3	6	0	0	0	0	0	0	3	6	9
65 to 74	14	18	0	0	0	0	0	0	14	18	32
75 to 84	16	41	0	0	0	0	0	0	16	41	57
85+	20	96	0	0	0	0	0	0	20	96	116
TOTALS	57	167	0	0	0	0	0	0	57	167	224

RES	SIDENTS B	Y PAYMENT	SOURC	E AND LEV	EL OF CA	RE				
LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT I	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	27	150	0	0	47	0	224	Nursing Care	203	178
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	27	150	0	0	47	0	224			
	RESIDEN	ITS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFF	ING	

RESI	DENTS BY RA	CIAL/ETHNIC	ITY GROU	PING		STAFFI	NG
RACE	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Asian	0	0	0	0	0	Administrators	3.00
American Indian	0	0	0	0	0	Physicians	1.00
Black	6	0	0	0	6	Director of Nursing	3.00
Hawaiian/Pacific Isl.	0	0	0	0	0	Registered Nurses	34.00
White	218	0	0	0	218	LPN's	22.00
Race Unknown	0	0	0	0	0	Certified Aides	100.00
Total	224	0	0	0	224	Other Health Staff Non-Health Staff	0.00 91.00
ETHNICITY	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	Totals	254.00
Hispanic	7	0	0	0	7		
Non-Hispanic	217	0	0	0	217		
Ethnicity Unknown	0	0	0	0	0		
Total	224	0	0	0	224		

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
35.3%	43.7%	0.0%	5.5%	15.5%	100.0%	Expense*	Total Net Revenue	
6,724,747	8,327,248	0	1,044,266	2,951,122	19,047,383	0	0.0%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	2	DIAGNOSIS	
TOTAL FACILITIES	3	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	3	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	3	Skin Disorders	0
NON-PROFIT OWNERSHIP	2	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	1	Other Restrictions	2	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	4	Total Residents	Diagnose	d with Mental Illness	15

LICENSED BEDS	REDS I	NUSE	MEDICARE/MEDICAID	CERTIFIED BEDS
LICENSED BEDS,	DEDO I	IN USE,	MIEDICANE/MEDICAID	CEVILLED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	15
Nursing Care	155	155	138	155	131	24	72	155	Residents on 1/1/2015	136
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	149
Intermediate DD	16	16	16	16	15	1		16	Total Discharges 2015	139
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	146
TOTAL BEDS	171	171	154	171	146	25	72	171	-	

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days		Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	2,105	8.0%	24,874	44.0%	0	0	18,760	0	45,739	80.8%	80.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,308	90.9%	0	0	0	0	5,308	90.9%	90.9%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	2,105	8.0%	30,182	48.4%	0	0	18,760	0	51,047	81.8%	81.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	1	7	0	0	1	7	8
45 to 59	3	0	0	0	3	2	0	0	6	2	8
60 to 64	2	1	0	0	0	1	0	0	2	2	4
65 to 74	10	5	0	0	0	0	0	0	10	5	15
75 to 84	9	27	0	0	0	1	0	0	9	28	37
85+	22	52	0	0	0	0	0	0	22	52	74
TOTALS	46	85	0	0	4	11	0	0	50	96	146

LEVEL	__	Y PAYMENT	Other			- Charity		AVERAC	SE DAILY PA	YMENT RA	TES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF C			DOUBLE
Nursing Care	7	71	0	0	53	0	131	Nursing Ca	re	179	178
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	er 22	0	0
ICF/DD		15	0	0	0	0	15	Intermediat	e DD	0	127
Sheltered Care			0	0	0	0	0	Shelter		0	0
TOTALS	7	86	0	0	53	0	146				
	RESIDEN	ITS BY RAC	IAL/ETHN	NICITY GRO	UPING				STAFFING	i	
		Nursing	Skilled		Sheltere			EMPLOYM		FULL-TI	
RACE		Care	Under 22	2 ICF/DE) Care	. 7	Γotals	CATEGO	RY	EQUIVAL	ENT
Asian		0	0	0	C)	0	Administrators	3		2.25
American Indian		0	0	0	C)	0	Physicians		0.00	
Black		0	0	1	C)	1	Director of Nursing		2.00	
Hawaiian/Pacific I	sl.	0	0	0	C)	0	Registered Nurses		1:	3.15
White		131	0	14	C)	145	LPN's		11.70	
Race Unknown		0	0	0	C)	0	Certified Aide	s	71.51	
Total		131	0	15	C)	146	Other Health	Staff	4.2	
								Non-Health S	taff	4	9.41
		Nursing	Skilled		Shelter	ed		Totals		15	4.25
ETHNICITY		Care	Under 22	2 ICF/DE) Care	-	Totals				
Hispanic		3	0	0	(0	3				
Non-Hispanic		128	0	15	(0	143				
Ethnicity Unknown	า	0	0	0	(0	0				
Total		131	0	15	(0	146				
				NET REVEN	IUE BY PA	YOR SC	URCE (Fiscal Ye	ear Data)			
									Charity	Charity	Care
Medicare	N	Medicaid	Other P	ublic Priv	ate Insuran	ice	Private Pay	TOTALS	Care	Expense a	as % of
5.6%		55.3%		0.4%	0.0)%	38.8%	100.0%	Expense*	Total Net	Revenue
479,088		4,738,019	32	,643		0	3,325,255	8,575,005	0	0	.0%

		•		•						
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AN DISCHARGES - 20	_
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D 11 / 4/4/2015	050
Nursing Care	742	738	647	734	616	126	554	657	Residents on 1/1/2015	659
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	1,024
Intermediate DD	16	15	13	15	13	3		16	Total Discharges 2015 Residents on 12/31/2015	1,026 657
Sheltered Care	49	49	49	49	26	23			Residents on 12/31/2015	657

TOTAL BEDS

807

802

709

798

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

152

554

673

. = . = = =	Med		Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	29,994	14.8%	115,892	48.3%	861	2,988	69,658	796	220,189	81.3%	81.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			4,440	76.0%	0	0	0	0	4,440	76.0%	81.1%
Sheltered Care					0	0	8,928	0	8,928	49.9%	49.9%
TOTALS	29,994	14.8%	120,332	49.0%	861	2,988	78,586	796	233,557	79.3%	79.8%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	3	0	0	0	2	1	0	0	5	1	6
45 to 59	15	17	0	0	3	4	0	0	18	21	39
60 to 64	11	13	0	0	0	2	0	0	11	15	26
65 to 74	29	45	0	0	1	0	0	0	30	45	75
75 to 84	50	146	0	0	0	0	2	7	52	153	205
85+	79	208	0	0	0	0	3	14	82	222	304
TOTALS	187	429	0	0	6	7	5	21	198	457	655

LEVEL			Other		Private	Charity	/	AVERAGE DAILY PAYMENT RATES
OF CARE	Medicare	Medicaid		Insurance	Pay	Care	TOTALS	
Nursing Care	77	320	0	11	208	0	616	Nursing Care 194 180
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22 0 0
ICF/DD		13	0	0	0	0	13	Intermediate DD 0 144
Sheltered Care			0	0	26	0	26	Shelter 127 0
TOTALS	77	333	0	11	234	0	655	
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING			STAFFING
		Nursing	Skilled		Shelter			EMPLOYMENT FULL-TIME
RACE		Care	Under 22	2 ICF/DI) Care)	Totals	CATEGORY EQUIVALENT
Asian		3	0	0	()	3	Administrators 8.00
American Indian		0	0	1	()	1	Physicians 7.00
Black		13	0	0	()	13	Director of Nursing 7.00
Hawaiian/Pacific I	sl.	0	0	0	()	0	Registered Nurses 99.70
White		600	0	12	26	6	638	LPN's 44.10
Race Unknown		0	0	0	()	0	Certified Aides 334.75
Total		616	0	13	26	6	655	Other Health Staff 31.70 Non-Health Staff 342.00
ETHNICITY		Nursing Care	Skilled Under 22	2 ICF/DI	Shelter O Care		Totals	Totals 874.25
Hispanic		6	0	0		0	6	
Non-Hispanic		548	0	13	2	6	587	
Ethnicity Unknown	า	62	0	0	(0	62	
Total		616	0	13	2	6	655	
			ı	NET REVE	NUE BY PA	YOR S	OURCE (Fis	iscal Year Data)
								Charity Charity Care
Medicare	N	Medicaid	Other P	ublic Pri	vate Insurar	nce	Private Pa	ay TOTALS Care Expense as % of
32.4%		36.8%	(0.2%	6.5	5%	24.1	1% 100.0% Expense* Total Net Revenue
14,286,726		16,230,211	107,	,517	2,867,87	73	10,621,16	68 44,113,495 135,112 0.3%

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	2	DIAGNOSIS	
TOTAL FACILITIES	4	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	3	Drug Addiction	3	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	3	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	3	Skin Disorders	0
NON-PROFIT OWNERSHIP	2	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	1	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	3	Total Residents	s Diagnosed	I with Mental Illness	32

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		•		•						
		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 201	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Danislanta an 4/4/0045	400
Nursing Care	147	143	136	143	110	37	57	155	Residents on 1/1/2015	109
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	166
Intermediate DD	15	15	14	14	14	1		15	Total Discharges 2015	131
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	144
TOTAL BEDS	162	158	150	157	124	38	57	170	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medi Pat. days	icare Occ. Pct.	Medi Pat. days		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	1,764	8.5%	23,734	42.0%	0	278	12,726	0	38,502	71.8%	73.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			4,704	85.9%	0	0	0	0	4,704	85.9%	85.9%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	1,764	8.5%	28,438	45.8%	0	278	12,726	0	43,206	73.1%	74.9%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECE	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	2	3	0	0	3	3	6
45 to 59	2	3	0	0	3	2	0	0	5	5	10
60 to 64	2	0	0	0	3	0	0	0	5	0	5
65 to 74	5	3	0	0	0	0	0	0	5	3	8
75 to 84	5	16	0	0	0	0	0	0	5	16	21
85+	16	57	0	0	0	1	0	0	16	58	74
TOTALS	31	79	0	0	8	6	0	0	39	85	124

LEVEL	INEN 12 B	Y PAYMENT	Other	E AND LEV	Private	R E Charit	.,		AVED AC	SE DAILY PA	VMENT D	TEC
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	,	LS	LEVEL OF C			DOUBLE
Nursing Care	7	66	0	1	36	0	11	0	Nursing Ca	re	198	182
Skilled Under 22	0	0	0	0	0	0		0	Skilled Und	er 22	0	0
ICF/DD		14	0	0	0	0	1	4	Intermediat	e DD	118	112
Sheltered Care			0	0	0	0		0	Shelter		0	0
TOTALS	7	80	0	1	36	0	12	24				
	RESIDE	NTS BY RAC	IAL/ETHN	NICITY GRO	DUPING					STAFFING		
		Nursing	Skilled		Shelte	red			EMPLOYM	ENT	FULL-TI	
RACE		Care	Under 22	2 ICF/D	D Car	е	Totals		CATEGO	RY	EQUIVAL	ENT
Asian		0	0	C)	0	0		Administrators	3		3.25
American Indian		0	0	C)	0	0		Physicians			1.00
Black		1	0	1		0	2		Director of Nu	rsing		3.00
Hawaiian/Pacific I	sl.	0	0	C)	0	0		Registered Nurses		11.25	
White		109	0	13	3	0	122		LPN's		7.00	
Race Unknown		0	0	C)	0	0		Certified Aide	S	5	6.00
Total		110	0	14	,	0	124		Other Health			7.00
									Non-Health S	taff	2	6.50
		Nursing	Skilled		Shelte	ered			Totals		11	5.00
ETHNICITY		Care	Under 22	2 ICF/D			Totals					
Hispanic		0	0	0		0	0					
Non-Hispanic		110	0	14		0	124					
Ethnicity Unknown	า	0	0	0		0	0					
Total		110	0	14		0	124					
				NET REVE	NUE BY P	AYOR S	OURCE (Fiscal Ye	ear Data)			
										Charity	Charity	Care
Medicare	N	/ledicaid	Other P	ublic Pri	vate Insura	ince	Private	Pay	TOTALS	Care	Expense a	
11.2%		47.4%		5.7%	2	.0%	33	3.7%	100.0%	Expense*	Total Net	Revenue
781,758		3,323,560	397	,196	139,	196	2,364,	,563	7,006,273	0	0	.0%

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	3	DIAGNOSIS	
TOTAL FACILITIES	12	Chronic Alcoholism	11	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	12	Drug Addiction	12	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	9	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	12	Skin Disorders	0
NON-PROFIT OWNERSHIP	10	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	1	Total Residents	s Diagnosed	I with Mental Illness	51

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		•		•						
		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 201	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D : 1	0.47
Nursing Care	245	245	199	245	177	68	167	243	Residents on 1/1/2015	317
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	344
Intermediate DD	80	80	80	80	72	8		80	Total Discharges 2015	366
Sheltered Care	49	49	47	49	47	2			Residents on 12/31/2015	295
TOTAL BEDS	374	374	326	374	296	78	167	323	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	3,721	6.1%	15,953	18.0%	0	10	21,422	0	41,106	46.0%	46.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			25,800	88.4%	0	0	0	0	25,800	88.4%	88.4%
Sheltered Care					0	0	16,425	730	17,155	95.9%	95.9%
TOTALS	3,721	6.1%	41,753	35.4%	0	10	37,847	730	84,061	61.6%	61.6%

RESIDENTS BY AGE GROUP. SEX AND LEVEL OF CARE - DECEMBER 31. 2015

	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	0	0	0	0	6	4	0	0	6	4	10	
45 to 59	1	2	0	0	12	18	0	0	13	20	33	
60 to 64	2	5	0	0	5	8	0	0	7	13	20	
65 to 74	12	12	0	0	5	3	1	0	18	15	33	
75 to 84	23	25	0	0	4	3	2	2	29	30	59	
85+	20	75	0	0	1	3	10	32	31	110	141	
TOTALS	58	119	0	0	33	39	13	34	104	192	296	

LEVEL			Other		Private	Charity	,		AVERAGE DAILY	PAYMENT F	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTAL	.S	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	15	75	0	10	77	0	17	7	Nursing Care	186	164
Skilled Under 22	0	0	0	0	0	0	(0	Skilled Under 22	0	0
ICF/DD		72	0	0	0	0	7:	2	Intermediate DD	191	182
Sheltered Care			0	0	45	2	4	7	Shelter	98	0
TOTALS	15	147	0	10	122	2	29	6			
	RESIDEN	ITS BY RAC	IAL/ETH	NICITY GRO	UPING				STAFFI	NG	
		Nursing	Skilled		Shelte	red			EMPLOYMENT	FULL-	ГІМЕ
RACE		Care	Under 2	2 ICF/DD	Car	e	Totals		CATEGORY	EQUIVA	ALENT
Asian		0	0	0		0	0		Administrators		6.25
American Indian		0	0	0		0	0		Physicians		1.00
Black		1	0	7		0	8		Director of Nursing		3.50
Hawaiian/Pacific I	sl.	0	0	0		0	0		Registered Nurses		18.75
White		176	0	62	4	7	285		LPN's		40.75
Race Unknown		0	0	3		0	3		Certified Aides	1	73.50
Total		177	C	72	4	7	296		Other Health Staff		44.50
									Non-Health Staff		84.00
		Nursing	Skilled		Shelte	red			Totals	3	72.25
ETHNICITY		Care	Under 2	2 ICF/DD	Car	е	Totals				
Hispanic		1	C) 3		0	4				
Non-Hispanic		98	C	43	4	17	188				
Ethnicity Unknow	า	78	C	26		0	104				
Total		177	C	72	4	17	296				

						Charity	Charity Care
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of
17.6%	23.9%	22.5%	2.8%	33.3%	100.0%	Expense*	Total Net Revenue
3,450,201	4,693,759	4,419,270	542,272	6,531,972	19,637,474	37,550	0.2%

^{*}Charity Expense does not include expenses which may be considered a community benefit.

*Data Not Collected for 2015

Total Residents Diagnosed with Mental Illness

TOTALS

Non-Medical Conditions

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

1

1

15

CONTINUING CARE COMMUNITY

Reported Identified Offenders

LIFE CARE FACILITY

No Restrictions

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2019	5
Nursing Care	535	535	454	533	359	176	323	549	Residents on 1/1/2015 Total Admissions 2015	420
Skilled Under 22	0	0	0	0	0	0		0		504
Intermediate DD	16	16	16	16	16	0		16	Total Discharges 2015	549
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	375
TOTAL BEDS	551	551	470	549	375	176	323	565	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	10,370	8.8%	92,972	46.4%	3,262	1,017	39,508	0	147,129	75.3%	75.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,526	94.6%	0	0	0	0	5,526	94.6%	94.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,370	8.8%	98,498	47.8%	3,262	1,017	39,508	0	152,655	75.9%	75.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	7	2	0	0	2	1	0	0	9	3	12
45 to 59	16	9	0	0	5	2	0	0	21	11	32
60 to 64	9	9	0	0	0	1	0	0	9	10	19
65 to 74	22	30	0	0	1	2	0	0	23	32	55
75 to 84	41	64	0	0	0	1	0	0	41	65	106
85+	35	115	0	0	0	1	0	0	35	116	151
TOTALS	130	229	0	0	8	8	0	0	138	237	375

0

0

0

103

LEVEL			Other		Private	Charit	v		AVERAGE DA	LY PAYMENT	RATES	
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	,	ALS	LEVEL OF CARE	SINGL		
Nursing Care	19	227	9	5	99	0	3	59	Nursing Care	202	162	
Skilled Under 22	0	0	0	0	0	0		0	Skilled Under 22	0	0	
ICF/DD		16	0	0	0	0		16	Intermediate DD	0	116	
Sheltered Care			0	0	0	0		0	Shelter	0	0	
TOTALS	19	243	9	5	99	0	3	75				
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GR	DUPING				STA	FFING		
		Nursing	Skilled		Shelte				EMPLOYMENT	_	L-TIME	
RACE		Care	Under 22	2 ICF/D	D Ca	re	Totals		CATEGORY	EQUI	VALENT	
Asian		0	0	()	0	0	=	Administrators		7.25	
American Indian		0	0	()	0	0		Physicians		0.00	
Black		7	0	()	0	7		Director of Nursing		6.00	
Hawaiian/Pacific I	sl.	0	0	()	0	0		Registered Nurses		36.25	
White		351	0	16	3	0	367		LPN's		36.00	
Race Unknown		1	0	()	0	1		Certified Aides		166.00	
Total		359	0	16	6	0	375		Other Health Staff Non-Health Staff		34.00	
											185.00	
ETHNICITY		Nursing Care	Skilled Under 2	2 ICF/D	Shelte D Ca		Totals		Totals		470.50	
Hispanic		3	0	()	0	3	_				
Non-Hispanic		291	0			0	307					
Ethnicity Unknown	า	65	0			0	65					
Total		359	0	16	3	0	375	-				
				NET REVE	NUE BY P	AYOR S	OURCE	(Fiscal Ye	ar Data)			
									Cha	rity Cha	arity Care	
Medicare	N	Medicaid	Other F	ublic Pr	ivate Insura	ance	Private	Pay	TOTALS Ca	re Expen	se as % of	
19.0%		45.1%		1.0%	3	3.5%	3	31.4%	100.0% Exp	ense* Total I	Net Revenue	
4,925,177		11,658,272	246	,933	913,	178	8,122	2,570	25,866,130	0	0.0%	

LICENSED BEDS	111100	BAEDIO A DE /BA	IEDIO AID OF	DTIFIED DED

		,		_,						
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 2	_
									Residents on 1/1/2015	538
Nursing Care	620	620	550	620	479	141	534	511	Total Admissions 2015	1,099
Skilled Under 22	0	0	0	0	0	0		0		•
Intermediate DD	32	32	32	32	30	2		32	Total Discharges 2015	1,101
Sheltered Care	43	27	27	27	27	16			Residents on 12/31/2015	536
TOTAL BEDS	695	679	609	679	536	159	534	543		

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medio	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	20,323	10.4%	78,055	41.8%	4,166	3,424	65,373	1,003	172,344	76.2%	76.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,126	95.3%	0	0	0	0	11,126	95.3%	95.3%
Sheltered Care					0	0	8,600	0	8,600	54.8%	87.3%
TOTALS	20,323	10.4%	89,181	45.0%	4,166	3,424	73,973	1,003	192,070	75.7%	77.5%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	2	0	0	0	9	2	0	0	11	2	13	
45 to 59	6	7	0	0	7	9	0	0	13	16	29	
60 to 64	5	6	0	0	0	2	0	0	5	8	13	
65 to 74	23	35	0	0	1	0	0	0	24	35	59	
75 to 84	50	84	0	0	0	0	2	5	52	89	141	
85+	56	205	0	0	0	0	3	17	59	222	281	
TOTALS	142	337	0	0	17	13	5	22	164	372	536	

LEVEL	Madias	Madiaatd	Other	l	Private	Charity	TOTALC		GE DAILY PA			
OF CARE	Medicare	Medicaid		Insurance	Pay	Care	TOTALS	LEVEL OF (SINGLE	DOUBLE	
Nursing Care	53	205	25	12	181	3	479	Nursing Ca		200	171	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und		0	0	
ICF/DD		30	0	0	0	0	30	Intermedia	te DD	0	125	
Sheltered Care			0	0	27	0	27	Shelter		76	0	
TOTALS	53	235	25	12	208	3	536					
	RESIDEN	ITS BY RAC	IAL/ETHN	ICITY GRO	UPING				STAFFING	i		
		Nursing	Skilled		Shelte	red		EMPLOYM	IENT	FULL-	ГІМЕ	
RACE		Care	Under 22	ICF/DD	Car	е 7	otals	CATEGO	PRY	EQUIVA	ALENT	
Asian		0	0	0		0	0	Administrator	S		7.50	
American Indian		0	0	0		0	0	Physicians	Physicians		0.00	
Black		23	0	3		0	26	Director of Nursing			7.00	
Hawaiian/Pacific I	sl.	0	0	0		0	0	Registered Nurses		46.25		
White		456	0	27	2	27	510	LPN's		53.50		
Race Unknown		0	0	0		0	0	Certified Aide	es	2	33.00	
Total		479	0	30	2	27	536	Other Health			37.00	
								Non-Health S	taff	1	73.00	
		Nursing	Skilled		Shelte	red		Totals		5	57.25	
ETHNICITY		Care	Under 22	ICF/DD) Car	e -	Γotals					
Hispanic		3	0	0		0	3					
Non-Hispanic		476	0	30	2	27	533					
Ethnicity Unknown	า	0	0	0		0	0					
Total		479	0	30	2	27	536					
			N	IET REVEN	UE BY PA	AYOR SO	URCE (Fiscal Ye	ear Data)				
									Charity		ty Care	
Medicare	N	/ledicaid	Other Pu		ate Insura		Private Pay	TOTALS	Care	•	as % of	
22.8%		28.8%		.7%	_	.3%	41.3%	100.0%	Expense*		t Revenue	
7,754,625		9,790,948	583,	547	1,788,6	83	14,023,291	33,941,094	117,491		0.3%	

ILLINOIS LONG-TERM CARE DATA SU	MMARY-CA	LENDAR YEAR 2015 LTC P	LANNING ARE	A Whiteside	
HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
		Aggressive/Anti-Social	8	DIAGNOSIS	
TOTAL FACILITIES	15	Chronic Alcoholism	7	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	15	Drug Addiction	9	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	3	Alzheimer Disease	0
NURSING CARE BEDS ONLY	10	Mental Illness	2	Mental Illness	0
DD CARE BEDS ONLY	5	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	1	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	14	Skin Disorders	0
NON-PROFIT OWNERSHIP	9	Infectious Disease w/ Isolation	4	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	6	Other Restrictions	4	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	2			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	33	Total Reside	nts Diagnosed	with Mental Illness	158

LICENSED	BEDS, BED	S IN USE, MEDICA	RE/MEDICAI	D CERTIFIE	D BEDS	
	PEAK	PEAK				

DICAID	ADMISSIONS AND DISCHARGES - 2015	
770 79 64	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	729 886 905 710

	,	,					
LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID
BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED
819	797	674	795	566	253	538	770
85	85	84	85	81	4		79
64	64	64	64	63	1		64
0	0	0	0	0	0		
968	946	822	944	710	258	538	913
	BEDS 819 85 64 0	LICENSED BEDS BEDS SET-UP 819 797 85 85 64 64 0 0	LICENSED BEDS BEDS BEDS SET-UP USED 819 797 674 85 85 84 64 64 64 0 0 0	LICENSED BEDS BEDS BEDS BEDS SET-UP USED SET-UP 819 797 674 795 85 85 84 85 64 64 64 64 0 0 0 0	LICENSED BEDS BEDS BEDS BEDS BEDS SET-UP USED SET-UP IN USE 819 797 674 795 566 85 85 84 85 81 64 64 64 64 63 0 0 0 0 0	LICENSED BEDS BEDS BEDS BEDS AVAILABLE BEDS SET-UP USED SET-UP IN USE BEDS 819 797 674 795 566 253 85 85 84 85 81 4 64 64 64 64 63 1 0 0 0 0 0 0	LICENSED BEDS BEDS BEDS BEDS AVAILABLE MEDICARE BEDS SET-UP USED SET-UP IN USE BEDS CERTIFIED 819 797 674 795 566 253 538 85 85 84 85 81 4 64 64 64 63 1 0 0 0 0 0

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	16,832	8.6%	129,916	46.2%	6,748	1,263	59,127	224	214,110	71.6%	73.6%
Skilled Under 22			29,565	102.5%	0	0	0	0	29,565	95.3%	95.3%
Intermediate DD			22,146	94.8%	0	0	0	0	22,146	94.8%	94.8%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	16,832	8.6%	181,627	54.5%	6,748	1,263	59,127	224	265,821	75.2%	77.0%

RESIDENTS BY AGE GROUP	P. SEX AND LEVEL OF CARE - DECEMBER 31, 2015

		IVEOIDE		o_	JEN AILD E	LVLL O. OA	NE DEG	-1410-11 01, 20			
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	34	20	15	13	16	17	0	0	65	50	115
45 to 59	58	24	23	18	6	5	0	0	87	47	134
60 to 64	16	13	2	2	1	6	0	0	19	21	40
65 to 74	31	36	5	2	4	6	0	0	40	44	84
75 to 84	37	74	1	0	0	2	0	0	38	76	114
85+	46	177	0	0	0	0	0	0	46	177	223
TOTALS	222	344	46	35	27	36	0	0	295	415	710

_	SIDENTS E	BY PAYMENT		AND LEVE							
LEVEL OF CARE	Madiaara	Medicaid	Other Public	lnauranaa		Charity	TOTALS	AVERAGE DAILY F LEVEL OF CARE		ATES DOUBLE	
	Medicare			Insurance	Pay	Care		<u> </u>			
Nursing Care	43	364	2	3	153	1	566	Nursing Care	190	162	
Skilled Under 22	0	81	0	0	0	0	81	Skilled Under 22	0	175	
ICF/DD		63	0	0	0	0	63	Intermediate DD	0	140	
Sheltered Care			0	0	0	0	0	Shelter	0	0	
TOTALS	43	508	2	3	153	1	710				
	RESIDE	NTS BY RAC	IAL/ETHN	ICITY GRO	UPING			STAFFIN	G		
		Nursing	Skilled		Shelter			EMPLOYMENT	FULL-TI		
RACE		Care	Under 22	ICF/DD	Care		Totals	CATEGORY	EQUIVAL	LENT	
Asian		3	0	0	()	3	Administrators	1	3.08	
American Indian		0	0	0	()	0	Physicians		1.00	
Black		12	9	8	()	29	Director of Nursing	1	11.33	
Hawaiian/Pacific	Isl.	0	0	0	()	0	Registered Nurses	4	42.92	
White		551	72	55	()	678	LPN's	7	5.30	
Race Unknown		0	0	0	()	0	Certified Aides		8.19	
Total		566	81	63	()	710	Other Health Staff		3.06	
								Non-Health Staff	21	8.11	
		Nursing	Skilled		Shelter	ed		Totals	77	2.99	
ETHNICITY		Care	Under 22	ICF/DE) Care	•	Totals				
Hispanic		12	4	4	(0	20				
Non-Hispanic		478	76	59	(0	613				
Ethnicity Unknow	'n	76	1	0	(0	77				
Total		566	81	63	(0	710				
			N	IET REVEN	UE BY PA	YOR S	OURCE (Fisca	l Year Data)			
								Charity	Charity	Care	
Medicare		Medicaid	Other Pu	ublic Priv	ate Insurar	ice	Private Pay	TOTALS Care	Expense a	as % of	
17.0%		54.1%	5	.9%	1.1	%	21.8%	100.0% Expense*	Total Net	Revenue	
8,063,752		25,610,899	2,806,	511	521,94	19	10,294,242	47,297,353 39,320	0	.1%	

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO		
		Aggressive/Anti-Social	17	DIAGNOSIS		
TOTAL FACILITIES	27	Chronic Alcoholism	19	Neoplasms	0	
HOSPITAL BASED UNITS	0	Developmentally Disabled	7	Endocrine/Metabolic	0	
FREE STANDING FACILITIES	27	Drug Addiction	20	Blood Disorders	0	
		Medicaid Recipient	0	Nervous System Non Alzheimer	0	
FACILITIES LICENSED FOR:		Medicare Recipient	7	Alzheimer Disease	0	
NURSING CARE BEDS ONLY	11	Mental Illness	9	Mental Illness	0	
DD CARE BEDS ONLY	11	Non-Ambulatory	1	Developmental Disability	0	
MULTI-LICENSED FACILITIES	5	Non-Mobile	1	Circulatory System	0	
		Public Aid Recipient	1	Respiratory System	0	
FACILITIES REPORTED BY		Under 65 Years Old	1	Digestive System	0	
OWNERSHIP TYPE		Unable to Self-Medicate	2	Genitourinary System Disorders	0	
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	23	Skin Disorders	0	
NON-PROFIT OWNERSHIP	15	Infectious Disease w/ Isolation	8	Musculo-skeletal Disorders	0	
FOR PROFIT OWNERSHIP	11	Other Restrictions	3	Injuries and Poisonings	0	
		No Restrictions	1	Other Medical Conditions	0	
CONTINUING CARE COMMUNITY	2			Non-Medical Conditions	0	
LIFE CARE FACILITY	4			TOTALS	0	
				*Data Not Collected for 2015		
Reported Identified Offenders	70	Total Residents	Diagnosed	with Mental Illness	519	

	LICENSED	BEDS, BEI	פט אוו פכ	E, MEDICA	KE/WEDI	CAID CERTIFIE	D RED2			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AN DISCHARGES - 20	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	- Decidents on 1/1/2015	2 242
Nursing Care	2,222	2,049	1,818	2,049	1,614	608	1496	1843	Residents on 1/1/2015	2,242
Skilled Under 22	99	99	99	99	98	1		93	Total Admissions 2015	4,835
Intermediate DD	180	180	180	180	178	2		180	Total Discharges 2015 Residents on 12/31/2015	4,911
Sheltered Care	434	434	315	434	271	163			Residents on 12/31/2015	2,166
TOTAL BEDS	2,935	2,762	2,412	2,762	2,161	774	1496	2116		

FACILITY UTILIZATION - 2015 BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	84,761	15.5%	358,269	53.3%	29,929	23,438	115,039	4	611,440	75.4%	81.8%
Skilled Under 22			35,362	104.2%	0	0	0	0	35,362	97.9%	97.9%
Intermediate DD			63,313	96.4%	0	0	365	0	63,678	96.9%	96.9%
Sheltered Care					0	0	100,334	2,896	103,230	65.2%	65.2%
TOTALS	84,761	15.5%	456,944	59.2%	29,929	23,438	215,738	2,900	813,710	76.0%	80.7%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	19	15	0	0	0	0	19	15	34
18 to 44	25	17	38	24	47	34	0	0	110	75	185
45 to 59	91	81	0	2	29	31	0	2	120	116	236
60 to 64	63	57	0	0	6	5	0	2	69	64	133
65 to 74	123	155	0	0	10	10	4	6	137	171	308
75 to 84	125	242	0	0	2	4	13	50	140	296	436
85+	136	498	0	0	0	0	58	136	194	634	828
TOTALS	563	1.050	57	41	94	84	75	196	789	1.371	2.160

RES LEVEL	IDENTS B	SY PAYMENT	CSOURCE Other	: AND LEVI	EL OF CAR Private	E Charity		A\/ED A	GE DAILY PA	VMENT DA	TEC
OF CARE	Medicare	Medicaid		Insurance	Private	Charle	TOTALS	LEVEL OF			DOUBLE
Nursing Care	191	949	98	80	286	9	1,613	Nursing Ca	are	290	225
Skilled Under 22	0	98	0	0	0	0	98	Skilled Un		0	0
ICF/DD		177	0	0	1	0	178	Intermedia	ite DD	205	162
Sheltered Care			0	0	265	6	271	Shelter		176	130
TOTALS	191	1,224	98	80	552	15	2,160				
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING				STAFFING		
		Nursing	Skilled		Shelter			EMPLOYN		FULL-TII	
RACE		Care	Under 22	ICF/DE) Care)	Totals	CATEGO	ORY	EQUIVAL	ENT.
Asian		11	1	2	(0	14	Administrato	rs	2	1.36
American Indian		0	1	1		0	2	Physicians			1.20
Black		140	17	23		0	180	Director of N	ursing	19	9.00
Hawaiian/Pacific I	sl.	0	2	0		0	2	Registered N	lurses	190	0.61
White		1,442	69	152	27	1	1,934	LPN's		22	5.02
Race Unknown		20	8	0	(0	28	Certified Aide	es	926	6.29
Total		1,613	98	178	27	1	2,160	Other Health		146	6.49
								Non-Health S	Staff	67	5.72
		Nursing	Skilled		Shelter	ed		Totals		220	5.69
ETHNICITY		Care	Under 22	ICF/DE) Care	Э	Totals				
Hispanic		33	5	9		0	47				
Non-Hispanic		1,571	93	169	27	1	2,104				
Ethnicity Unknow	า	9	0	0		0	9				
Total		1,613	98	178	27	1	2,160				
				NET REVEN	IUE BY PA	YOR SO	OURCE (Fiscal Y	ear Data)			
									Charity	Charity	Care
Medicare	ľ	Medicaid	Other Po	ublic Priv	ate Insurar	nce	Private Pay	TOTALS	Care	Expense a	s % of
22.9%		40.7%	3	3.3%	5.	5%	27.6%	100.0%	Expense*	Total Net I	Revenue
37,849,764		67,310,408	5,491,	412	9,059,4	70	45,690,169	165,401,223	1,466,163	0.	.9%

Reported Identified Offenders	3	Total Residents Diagnosed with Mental Illness
LICENSED BEDS, BE	DS IN USE, MEI	DICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2019	
Nursing Care	377	372	312	372	295	82	234	350	Residents on 1/1/2015	28
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	47
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	46
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	29
TOTAL BEDS	377	372	312	372	295	82	234	350	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Med	icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	14,673	17.2%	48,065	37.6%	626	1,083	38,631	0	103,078	74.9%	75.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	14,673	17.2%	48,065	37.6%	626	1,083	38,631	0	103,078	74.9%	75.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	8	5	0	0	0	0	0	0	8	5	13
60 to 64	7	5	0	0	0	0	0	0	7	5	12
65 to 74	20	14	0	0	0	0	0	0	20	14	34
75 to 84	24	50	0	0	0	0	0	0	24	50	74
85+	34	128	0	0	0	0	0	0	34	128	162
TOTALS	93	202	0	0	0	0	0	0	93	202	295

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LEVEL			Other			Charity	TOTAL 0		E DAILY PA		
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF C	ARE	SINGLE [OOUBLE
Nursing Care	33	137	0	8	117	0	295	Nursing Car	e	222	181
Skilled Under 22	0	0	0	0	0	0	0	Skilled Unde	er 22	0	0
ICF/DD		0	0	0	0	0	0	Intermediate	e DD	0	0
Sheltered Care			0	0	0	0	0	Shelter		0	0
TOTALS	33	137	0	8	117	0	295				
	RESIDEN	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING				STAFFING		
		Nursing	Skilled		Shelter			EMPLOYM		FULL-TII	
RACE		Care	Under 22	2 ICF/DE) Care	Т.	otals	CATEGO	RY	EQUIVAL	ENT
Asian		1	0	0	()	1	Administrators	1	4	4.00
American Indian		0	0	0	()	0	Physicians		(0.00
Black		0	0	0	()	0	Director of Nu	rsing	4	4.00
Hawaiian/Pacific I	sl.	0	0	0	()	0	Registered Nu	•	23	3.00
White		294	0	0	()	294	LPN's		40	0.00
Race Unknown		0	0	0	()	0	Certified Aides	3	126	6.00
Total		295	0	0	()	295	Other Health S	Staff	(9.00
								Non-Health St	aff	89	9.00
		Nursing	Skilled		Shelter	ed		Totals		29	5.00
ETHNICITY		Care	Under 22	2 ICF/DE			Totals				
Hispanic		6	0	0	(0	6				
Non-Hispanic		289	0	0	(0	289				
Ethnicity Unknown	า	0	0	0	(0	0				
Total		295	0	0	(0	295				
			ı	NET REVEN	IUE BY PA	YOR SO	URCE (Fiscal Y	ear Data)			
									Charity	Charity	Care
Medicare	N	/ledicaid	Other P		ate Insurar		Private Pay	TOTALS	Care	Expense a	
30.2%		29.8%	(0.1%	1.6	6%	38.2%	100.0%	Expense*	Total Net I	
5,991,136		5,911,265	25,	,090	313,88	39	7,570,289	19,811,669	0	0.	0%

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	15
Nursing Care	603	568	477	558	433	170	409	582	Residents on 1/1/2015	496
Skilled Under 22	70	70	70	70	68	2		60	Total Admissions 2015	910
Intermediate DD	16	16	15	16	15	1		16	Total Discharges 2015	890
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	516
TOTAL BEDS	689	654	562	644	516	173	409	658	-	

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF OARE		icare	Medio		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	16,316	10.9%	91,258	43.0%	2,838	5,809	34,385	0	150,606	68.4%	72.6%
Skilled Under 22			17,946	81.9%	0	61	0	0	18,007	70.5%	70.5%
Intermediate DD			5,570	95.4%	0	0	0	0	5,570	95.4%	95.4%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	16,316	10.9%	114,774	47.8%	2,838	5,870	34,385	0	174,183	69.3%	73.0%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	6	7	0	0	0	0	6	7	13
18 to 44	3	3	22	19	2	4	0	0	27	26	53
45 to 59	25	15	4	3	4	2	0	0	33	20	53
60 to 64	17	14	3	0	1	1	0	0	21	15	36
65 to 74	22	32	2	2	1	0	0	0	25	34	59
75 to 84	41	89	0	0	0	0	0	0	41	89	130
85+	36	136	0	0	0	0	0	0	36	136	172
TOTALS	144	289	37	31	8	7	0	0	189	327	516

LEVEL			Other		Private	Charity	/		AVERA	GE DAILY P	AYMENT F	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTA	LS	LEVEL OF C		SINGLE	DOUBLE
Nursing Care	46	260	7	26	94	0	43	33	Nursing Ca	re	198	169
Skilled Under 22	0	68	0	0	0	0	6	88	Skilled Und	ler 22	195	195
ICF/DD		15	0	0	0	0	1	5	Intermediat	e DD	0	107
Sheltered Care			0	0	0	0		0	Shelter		0	0
TOTALS	46	343	7	26	94	0	51	6				
	RESIDEN	ITS BY RAC	IAL/ETH	NICITY GRO	UPING					STAFFING	;	
		Nursing	Skilled		Shelte				EMPLOYM		FULL-	—
RACE		Care	Under 2	2 ICF/DI) Cai	е	Totals		CATEGO	RY	EQUIVA	ALENT
Asian		0	1	0		0	1		Administrator	S		8.25
American Indian		0	0	0		0	0		Physicians			1.00
Black		4	27	0		0	31		Director of Nu	ırsing		8.00
Hawaiian/Pacific I	sl.	98	0	0		0	98		Registered N	urses		58.25
White		331	40	15		0	386		LPN's			65.00
Race Unknown		0	0	0		0	0		Certified Aide			16.00
Total		433	68	3 15		0	516		Other Health			29.00
									Non-Health S	taff	1	00.00
		Nursing	Skilled		Shelte	ered			Totals		4	85.50
ETHNICITY		Care	Under 2	2 ICF/DI	O Ca	re	Totals					
Hispanic		1	2	2 0		0	3					
Non-Hispanic		432	66	15		0	513					
Ethnicity Unknown	า	0	C	0		0	0					
Total		433	68	3 15		0	516					
				NET REVE	NUE BY P	AYOR S	OURCE (Fiscal Ye	ear Data)			
										Charity	Charit	y Care
Medicare	M	1edicaid	Other F	Public Pri	vate Insura	ance	Private	Pay	TOTALS	Care	Expense	as % of
21.1%		55.7%		2.1%	6	.4%	1	4.7%	100.0%	Expense*	Total Ne	t Revenue
6,737,031		17,762,427	664	1,770	2,056,	784	4,695	,668	31,916,680	0		0.0%
*Charity Expense of	loes not inc	clude expens	es which	may be con	sidered a	communi	ity henefit	t				

Reported Identified Offenders 3 Total Residents Diagnosed with Mental Illness LICENSED BEDS. BEDS IN USE. MEDICARE/MEDICAID CERTIFIED BEDS

		- ,		,	-	-	_			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents on 4/4/0045	400
Nursing Care	218	211	159	209	146	72	159	218	Residents on 1/1/2015	138
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	244
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	236
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	146
TOTAL BEDS	218	211	159	209	146	72	159	218	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medio	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	4,832	8.3%	23,954	30.1%	2,515	721	19,864	0	51,886	65.2%	67.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,832	8.3%	23,954	30.1%	2,515	721	19,864	0	51,886	65.2%	67.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	0	0	0	0	0	1	1
45 to 59	4	2	0	0	0	0	0	0	4	2	6
60 to 64	5	3	0	0	0	0	0	0	5	3	8
65 to 74	12	9	0	0	0	0	0	0	12	9	21
75 to 84	12	23	0	0	0	0	0	0	12	23	35
85+	15	60	0	0	0	0	0	0	15	60	75
TOTALS	48	98	0	0	0	0	0	0	48	98	146

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LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT F	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTAL	S LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	14	72	4	3	53	0	14	6 Nursing Care	168	158
Skilled Under 22	0	0	0	0	0	0		Skilled Under 22	0	C
ICF/DD		0	0	0	0	0		0 Intermediate DD	0	C
Sheltered Care			0	0	0	0	1	0 Shelter	0	C
TOTALS	14	72	4	3	53	0	14	6		
	RESIDEN	TS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFF	ING	
RACE		Nursing Care	Skilled Under 2	2 ICF/DE	Shelte Car		Γotals	EMPLOYMENT CATEGORY	FULL- ⁻ EQUIV <i>F</i>	
Asian		2	0	0		0	2	Administrators		3.00
American Indian		0	0	0		0	0	Physicians		0.00
Black		2	0	0		0	2	Director of Nursing		3.00
Hawaiian/Pacific Is	sl.	0	0	0		0	0	Registered Nurses		11.40
White		142	0	0		0	142	LPN's		17.00
Race Unknown		0	0	0		0	0	Certified Aides		65.00
Total		146	C	0		0	146	Other Health Staff		3.00
								Non-Health Staff		58.00
		Nursing	Skilled		Shelte	ered		Totals	1	60.40
ETHNICITY		Care	Under 2	2 ICF/DE) Ca	re -	Totals			
Hispanic		1	C	0		0	1			
Non-Hispanic		145	C	0		0	145			
Ethnicity Unknown	ı	0	C	0		0	0			
Total		146	C	0		0	146			

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
23.8%	37.0%	1.2%	4.7%	33.2%	100.0%	Expense*	Total Net Revenue	
2,015,467	3,132,258	105,310	397,027	2,807,239	8,457,301	580	0.0%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

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IZZINOIO ZONO TZNIII OZINZ DZNIZ			0 : 2/4111110 /4112/	1	
HEALTH SERVICE AREA	002	ADMISSION RESTRICTION Aggressive/Anti-Social	-	RESIDENTS BY PRIMARY DIAGN DIAGNOSIS	OSIS*
TOTAL FACILITIES	13	Chronic Alcoholism	6	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	12	Drug Addiction	7	Blood Disorders	0
		Medicaid Recipient	1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	5	Alzheimer Disease	0
NURSING CARE BEDS ONLY	8	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	5	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	12	Skin Disorders	0
NON-PROFIT OWNERSHIP	5	Infectious Disease w/ Isolation	5	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	7	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	1	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	35	Total Re	sidents Diagnosed	with Mental Illness	182

LICE	NSED BEDS. BEDS	IN USE MEDI	CARF/MEDICAID (SERTIFIED REDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	015
Nursing Care Skilled Under 22	950 0	928 0	756 0	923 0	665 0	285 0	870	842 0	Residents on 1/1/2015 Total Admissions 2015	741 1,822
Intermediate DD Sheltered Care	80 0	80 0	79 0	80 0	78 0	2 0		80	Total Discharges 2015 Residents on 12/31/2015	1,786 777
TOTAL BEDS	1,030	1,008	835	1,003	743	287	870	922	=	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	32,055	10.1%	129,123	42.0%	1	6,165	60,896	9	228,249	65.8%	67.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			28,037	96.0%	0	0	0	0	28,037	96.0%	96.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	32,055	10.1%	157,160	46.7%	1	6,165	60,896	9	256,286	68.2%	69.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	8	11	0	0	12	19	0	0	20	30	50
45 to 59	33	38	0	0	13	12	0	0	46	50	96
60 to 64	18	30	0	0	3	2	0	0	21	32	53
65 to 74	44	67	0	0	7	6	0	0	51	73	124
75 to 84	60	103	0	0	3	0	0	0	63	103	166
85+	54	199	0	0	1	0	0	0	55	199	254
TOTALS	217	448	0	0	39	39	0	0	256	487	743

LEVEL	IDEN 12 B	Y PAYMENT	Other	E AND LEV	EL OF CA Private	RE Chari	tv.		AVED AC	SE DAILY PA	VMENT F	DATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	,	ΓALS	LEVEL OF C		SINGLE	DOUBLE
Nursing Care	105	368	0	12	180	0		665	Nursing Ca	re	265	223
Skilled Under 22	0	0	0	0	0	0		0	Skilled Und	er 22	0	0
ICF/DD		78	0	0	0	0		78	Intermediat	e DD	0	117
Sheltered Care			0	0	0	0		0	Shelter		0	0
TOTALS	105	446	0	12	180	0		743				
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GR	OUPING					STAFFING	i	
		Nursing	Skilled		Shelt				EMPLOYM		FULL-	
RACE		Care	Under 22	2 ICF/D	D Ca	re	Totals		CATEGO	RY	EQUIVA	ALENT
Asian		2	0)	0	2		Administrators	S		9.25
American Indian		0	0		0	0	0		Physicians			0.00
Black		26	0		5	0	31		Director of Nursing		8.00	
Hawaiian/Pacific I	sl.	0	0)	0	0		Registered Nurses		56.25	
White		635	0	7	3	0	708		LPN's		1	111.00
Race Unknown		2	0		0	0	2		Certified Aides		3	368.00
Total		665	0	7	3	0	743		Other Health S			74.00 171.00
ETHNICITY		Nursing Care	Skilled Under 2	2 ICF/E	Shelt DD Ca		Totals		Totals		7	797.50
Hispanic		7	0		2	0	9					
Non-Hispanic		658	0	-	=	0	734					
Ethnicity Unknown	า	0	0)	0	0					
Total		665	0	78	3	0	743					
				NET REVE	NUE BY F	AYOR S	SOURCI	E (Fiscal Ye	ear Data)			
										Charity	Chari	ty Care
Medicare	N	/ledicaid	Other P	ublic Pr	ivate Insur	ance	Priva	te Pay	TOTALS	Care	Expense	as % of
26.2%		42.2%		0.9%	-	7.5%		23.2%	100.0%	Expense*	Total Ne	et Revenue
13,154,737		21,176,974	453	,849	3,778	341	11,6	61,162	50,225,063	0		0.0%

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	IOSIS*
		Aggressive/Anti-Social	10	DIAGNOSIS	
TOTAL FACILITIES	14	Chronic Alcoholism	8	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	5	Endocrine/Metabolic	0
FREE STANDING FACILITIES	14	Drug Addiction	8	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	10	Mental Illness	8	Mental Illness	0
DD CARE BEDS ONLY	3	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	2	Circulatory System	0
		Public Aid Recipient	2	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	1	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	1	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	2	Ventilator Dependent	14	Skin Disorders	0
NON-PROFIT OWNERSHIP	6	Infectious Disease w/ Isolation	3	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	6	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	5	Total Residents	s Diagnosed	l with Mental Illness	251

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		- ,		,	-	-	_			
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	_
Nursing Care	1,282	1,232	1,109	1,205	995	287	1088	927	Residents on 1/1/2015 Total Admissions 2015	1,097 2,036
Skilled Under 22 Intermediate DD	0 48	0 48	43	0 48	43	0 5		0 47	Total Discharges 2015	2,043
Sheltered Care	26	32	26	32	21	5			Residents on 12/31/2015	1,090
TOTAL BEDS	1,356	1,312	1,178	1,285	1,059	297	1088	974		

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Med	licaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	54,800	13.8%	143,249	42.3%	2,346	66,867	98,162	19	365,443	78.1%	81.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			15,703	91.5%	0	0	0	0	15,703	89.6%	89.6%
Sheltered Care					0	0	6,928	0	6,928	73.0%	59.3%
TOTALS	54,800	13.8%	158,952	44.7%	2,346	66,867	105,090	19	388,074	78.4%	81.0%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	3	0	0	0	11	15	0	0	14	15	29
45 to 59	11	11	0	0	3	4	0	0	14	15	29
60 to 64	17	15	0	0	6	0	0	0	23	15	38
65 to 74	53	66	0	0	0	1	1	0	54	67	121
75 to 84	122	146	0	0	1	2	0	3	123	151	274
85+	205	346	0	0	0	0	1	16	206	362	568
TOTALS	411	584	0	0	21	22	2	19	434	625	1.059

LEVEL		Y PAYMENT	Other		Private	Charity		AVERAC	SE DAILY PA	YMENT R	ATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF C			DOUBLE
Nursing Care	142	378	6	191	278	0	995	Nursing Ca	re	332	301
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	er 22	0	0
ICF/DD		43	0	0	0	0	43	Intermediat	e DD	0	128
Sheltered Care			0	0	21	0	21	Shelter		106	160
TOTALS	142	421	6	191	299	0	1,059				
	RESIDEN	NTS BY RAC	IAL/ETHN	NICITY GRO	UPING				STAFFING	i	
		Nursing	Skilled		Shelte			EMPLOYM		FULL-T	
RACE		Care	Under 22	2 ICF/DE) Car	е	Totals	CATEGO	RY	EQUIVA	LENT
Asian		1	0	0		0	1	Administrators	S		13.25
American Indian		0	0	0		0	0	Physicians			0.00
Black		9	0	2		0	11	Director of Nursing		11.00	
Hawaiian/Pacific I	sl.	0	0	2		0	2	Registered Nu	ırses	160.82	
White		923	0	14	2	1	958	LPN's		87.01	
Race Unknown		62	0	25		0	87	Certified Aide	~	536.28	
Total		995	0	43	2	1	1,059	Other Health		44.58	
								Non-Health S	taff	39	93.45
		Nursing	Skilled		Shelte	red		Totals		12	46.39
ETHNICITY		Care	Under 22	2 ICF/DI) Car	е	Totals				
Hispanic		8	0	0		0	8				
Non-Hispanic		987	0	43	2	21	1,051				
Ethnicity Unknown	า	0	0	0		0	0				
Total		995	0	43	2	21	1,059				
				NET REVEN	IUE BY PA	YOR SO	OURCE (Fiscal Y	ear Data)			
									Charity	Charity	y Care
Medicare	N	/ledicaid	Other P	ublic Priv	ate Insura	nce	Private Pay	TOTALS	Care	Expense	
26.2%		23.6%		9.5%	1.	9%	38.8%	100.0%	Expense*	Total Net	Revenue
23,319,867		21,024,658	8,470	,903	1,681,1	73	34,582,274	89,078,875	63,053	(0.1%

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care	360	353	324	353	298	62	200	360	Residents on 1/1/2015	30
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	56
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	57
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	29
TOTAL BEDS	360	353	324	353	298	62	200	360	-	

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Med	licaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	9,899	13.6%	58,771	44.7%	0	2,496	36,589	29	107,784	82.0%	83.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	9,899	13.6%	58,771	44.7%	0	2,496	36,589	29	107,784	82.0%	83.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	2	0	0	0	0	0	0	2	2	4
45 to 59	10	8	0	0	0	0	0	0	10	8	18
60 to 64	8	5	0	0	0	0	0	0	8	5	13
65 to 74	16	26	0	0	0	0	0	0	16	26	42
75 to 84	21	49	0	0	0	0	0	0	21	49	70
85+	29	122	0	0	0	0	0	0	29	122	151
TOTALS	86	212	0	0	0	0	0	0	86	212	298

RES LEVEL	IDENTS B	Y PAYMENT	SOURC Other	E AND LE					41/554			
OF CARE	Medicare	Medicaid	Public	Insurance	Private Pay		arity are	TOTALS	LEVEL OF C	GE DAILY PA Care		OOUBLE
Nursing Care	26	157	0	29	85		1	298	Nursing Ca	re	175	156
Skilled Under 22	0	0	0	0	0		0	0	Skilled Und		0	0
ICF/DD		0	0	0	0		0	0	Intermediat	e DD	0	0
Sheltered Care			0	0	0		0	0	Shelter		0	0
TOTALS	26	157	0	29	85		1	298				
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GR	OUPING					STAFFING		
		Nursing	Skilled		Shelt				EMPLOYM		FULL-TII	
RACE		Care	Under 2	2 ICF/[DD Ca	are	To	otals	CATEGO	RY	EQUIVAL	ENT
Asian		0	0		0	0		0	Administrator	S	(5.00
American Indian		0	0		0	0		0	Physicians		(0.00
Black		4	0		0	0		4	Director of Nursing		5.00	
Hawaiian/Pacific I	lsl.	0	0		0	0		0	Registered Nurses		30	0.00
White		294	0		0	0		294	LPN's		36.00	
Race Unknown		0	0		0	0		0	Certified Aide	s	132.00	
Total		298	0		0	0		298	Other Health		24.00	
									Non-Health S	taff	112	2.00
		Nursing	Skilled		Shel	tered			Totals		34	5.00
ETHNICITY		Care	Under 2	2 ICF/[are	Т	otals				
Hispanic		0	0		0	0		0				
Non-Hispanic		298	0		0	0		298				
Ethnicity Unknow	n	0	0		0	0		0				
Total		298	0	ı	0	0		298				
				NET REV	NUE BY I	PAYO	R SOI	JRCE (Fiscal Y	ear Data)			
										Charity	Charity	Care
Medicare	N	Medicaid	Other F	Public P	rivate Insu	rance	F	Private Pay	TOTALS	Care	Expense a	s % of
24.3%		39.1%		0.0%		5.9%		30.7%	100.0%	Expense*	Total Net I	Revenue
4,834,005		7,785,121		0	1,165	,612		6,105,891	19,890,629	4,827	0.	0%

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS
LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 2015	1
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	B : 1	005
Nursing Care	427	419	332	419	297	130	302	314	Residents on 1/1/2015	295
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	482
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	480
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	297
TOTAL BEDS	427	419	332	419	297	130	302	314	_	

FACILITY UTILIZATION - 2015 BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medi Pat. davs	icare Occ. Pct.	Medio		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	11.710	10.6%	38,897	33.9%	24.149	1.777	33.734	rai. uays	110.267	70.7%	72.1%
Skilled Under 22	11,710	10.070	0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	11,710	10.6%	38,897	33.9%	24,149	1,777	33,734	0	110,267	70.7%	72.1%

	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015													
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	TO	OTAL	GRAND			
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL			
Under 18	0	0	0	0	0	0	0	0	0	0	0			
18 to 44	2	3	0	0	0	0	0	0	2	3	5			
45 to 59	26	11	0	0	0	0	0	0	26	11	37			
60 to 64	9	10	0	0	0	0	0	0	9	10	19			
65 to 74	21	33	0	0	0	0	0	0	21	33	54			
75 to 84	29	46	0	0	0	0	0	0	29	46	75			
85+	21	86	0	0	0	0	0	0	21	86	107			
TOTALS	108	189	0	0	0	0	0	0	108	189	297			

LEVEL			Other		Private	Charity	/		AVERA	GE DAILY PA	YMENT RA	TES	
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTAL	LS	LEVEL OF C			DOUBLE	
Nursing Care	25	165	6	5	96	0	29	7	Nursing Ca	re	196	174	
Skilled Under 22	0	0	0	0	0	0	(0	Skilled Und	ler 22	0	0	
ICF/DD		0	0	0	0	0	(0	Intermediate DD		0	0	
Sheltered Care			0	0	0	0	(0	Shelter		0	0	
TOTALS	25	165	6	5	96	0	29	7					
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING								
		Nursing	Skilled	105/0	Shelter		T-1-1-		EMPLOYM	FULL-TII			
RACE		Care	Under 22	2 ICF/DI	O Care		Totals		CATEGORY		EQUIVALENT		
Asian		0	0	0	(0	0		Administrators		4.00		
American Indian		0	0	0	(0	0		Physicians		1.00		
Black		4	0	0	(0	4		Director of Nursing			4.00	
Hawaiian/Pacific I	sl.	0	0	0	(0	0		Registered Nurses		30	6.24	
White		293	0	0	(0	293		LPN's		33.14		
Race Unknown		0	0	0	(0	0		Certified Aides		117.60		
Total		297	0	0	(0	297		Other Health	Staff	50.20		
									Non-Health S	taff	87.50		
		Nursing	Skilled		Shelter	ed			Totals		333	3.68	
ETHNICITY		Care	Under 22	2 ICF/D	D Care	9	Totals						
Hispanic		5	0	0		0	5						
Non-Hispanic		292	0	0		0	292						
Ethnicity Unknown	า	0	0	0		0	0						
Total		297	0	0		0	297						
			ı	NET REVE	NUE BY PA	YOR S	OURCE (F	Fiscal Ye	ear Data)				
										Charity	Charity	Care	
Medicare	ľ	Medicaid	Other P	ublic Pri	vate Insurar	nce	Private F	Pay	TOTALS	Care	Expense a	s % of	
25.0%		32.4%		1.0%	6.5	5%	35	5.1%	100.0%	Expense*	* Total Net Reve		
4,354,017		5,635,992	174	,360	1,125,7	16	6,117,	941	17,408,026 0		0	.0%	

ILLINOIS LONG-	TERM CARE	DATA SUM	IMARY-C	ALENDAR	YEAR 201	5	LTC PLANNING	G AREA		Peoria		
HEALTH SERVICE	E AREA		002	A	DMISSIO	N RESTRICTION	ONS		RESI	DENTS BY PRIMARY DIAGN	NOSIS*	
				Aggres	sive/Anti-S	Social		7	DIAGN	OSIS		
TOTAL FACILITIE	S		20	Chroni	c Alcoholis	sm		8	Neop	lasms	0	
HOSPITAL BASE	UNITS		1	Develo	pmentally	Disabled		5	Endocrine/Metabolic			
FREE STANDING	FACILITIES		19	Drug A	ddiction			10	Blood	Disorders	0	
				Medica	id Recipie	nt		3	Nervo	ous System Non Alzheimer	0	
FACILITIES LICEN	NSED FOR:			Medica	re Recipie	ent		2	Alzł	neimer Disease	0	
NURSING CA	RE BEDS ON	ILY	14	Mental	Illness			7	Menta	al Illness	0	
DD CARE BEI	OS ONLY		4	Non-Ar	nbulatory			1	Devel	opmental Disability	0	
MULTI-LICEN:	SED FACILIT	TES	2	Non-M	obile			1	Circul	0		
				Public	Aid Recipi	ent		8	Respi	ratory System	0	
FACILITIES REPO	RTED BY			Under	65 Years C	Old		1	Diges	tive System	0	
OWNERSHIP TYP	Έ			Unable	to Self-Me	edicate		1	Genit	ourinary System Disorders	0	
GOVERNMENTAL OWNERSHIP			1	Ventila	tor Depend	dent		20	Skin I	Disorders	0	
NON-PROFIT	OWNERSHI	P	10	Infection	us Diseas	e w/ Isolation		6	Musc	ulo-skeletal Disorders	0	
FOR PROFIT	OWNERSHIP)	9	Other F	Restrictions	S		5	Injurie	es and Poisonings	0	
				No Res	strictions			0	Other	Medical Conditions	0	
CONTINUING CAP	RE COMMUN	IITY	3						Non-N	Medical Conditions	0	
LIFE CARE FACIL	.ITY		2						TOTA	ALS	0	
									*Data	Not Collected for 2015		
Reported Identi	fied Offende	rs	126			Total F	Residents Diag	nosed v	with Me	ental Illness	404	
	LICENSED	BEDS, BEI	S IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	D BEDS					
		PEAK	PEAK							ADMISSIONS AN	ID	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDI	CAID	DISCHARGES - 20		
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERT	IFIED		1,437	
Nursing Care	1,731	1,703	1,507	1,691	1,366	365	781	1	232	Residents on 1/1/2015		
Skilled Under 22	0	0	0	0	0	0			Total Admissions 2015		2,780 2,830	
Intermediate DD	16	16	16	16	15	1			Total Discharges 2015			

15

3

1,384

Intermediate DD

Sheltered Care

TOTAL BEDS

16

6

1,753

16

1,725

6

16

6

1,529

16

6

1,713

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

1

3

781

369

16

1248

Residents on 12/31/2015

1,387

		icare		icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	45,877	16.1%	313,215	69.7%	3,309	16,756	122,185	3,688	505,030	79.9%	81.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			4,321	74.0%	1,432	0	0	0	5,753	98.5%	98.5%
Sheltered Care					0	0	1,245	19	1,264	57.7%	57.7%
TOTALS	45,877	16.1%	317,536	69.7%	4,741	16,756	123,430	3,707	512,047	80.0%	81.3%

	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015												
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND		
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL		
Under 18	0	0	0	0	0	1	0	0	0	1	1		
18 to 44	57	54	0	0	0	2	0	0	57	56	113		
45 to 59	142	87	0	0	0	7	0	0	142	94	236		
60 to 64	60	52	0	0	0	2	0	0	60	54	114		
65 to 74	76	90	0	0	0	3	0	0	76	93	169		
75 to 84	72	171	0	0	0	0	1	1	73	172	245		
85+	93	412	0	0	0	0	0	1	93	413	506		
TOTALS	500	866	0	0	0	15	1	2	501	883	1,384		

LEVEL			Other		EL OF CAR Private	Charit	v	ΔVFRΔC	SE DAILY PA	YMENT RA	TES	
	Medicare	Medicaid		Insurance	Pay	Care	TOTALS	LEVEL OF C			OUBLE	
Nursing Care	111	858	5	45	336	11	1,366	Nursing Ca	re	268	236	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	er 22	0	0	
ICF/DD		15	0	0	0	0	15	Intermediat	e DD	184	0	
Sheltered Care			0	0	3	0	3	Shelter		103	0	
TOTALS	111	873	5	45	339	11	1,384					
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING				STAFFING			
D.4.0.E		Nursing Care	Skilled Under 22	ICF/DE	Sheltere Care	ed	Totals		EMPLOYMENT I CATEGORY E			
RACE										EQUIVALEN		
Asian		3	0	0			3	Administrator	S	17.00		
American Indian		1	0	0	0		1	Physicians			.00	
Black		142	0	0	0		142	Director of Nu	•		7.00	
Hawaiian/Pacific I	sl.	0	0	0	0		0	•	Registered Nurses		9.60	
White		1,218	0	15	3		1,236		LPN's		6.60	
Race Unknown		2	0	0	0	1	2		Certified Aides		5.60	
Total		1,366	0	15	3	;	1,384	Other Health S		68.00 462.30		
		Nursing	Skilled		Sheltere	ed		Totals		1387	7.10	
ETHNICITY		Care	Under 22	! ICF/DI) Care		Totals					
Hispanic		14	0	1	()	15					
Non-Hispanic		1,352	0	14	3	3	1,369					
Ethnicity Unknown	1	0	0	0	()	0					
Total		1,366	0	15	3	3	1,384					
			N	NET REVEN	IUE BY PA	YOR S	OURCE (Fiscal	Year Data)				
									Charity	Charity	Care	
Medicare	N	/ledicaid	Other Po	ublic Priv	ate Insuran	се	Private Pay	TOTALS	Care	Expense a	s % of	
23.3%		43.3%	C).7%	6.8	%	25.9%	100.0%	Expense*	Total Net F	Revenue	
22,573,633		42,038,540	666,	527	6,574,89	16	25,149,479	97,003,075	811,019	0.	8%	

ILLINOIS LONG-	TERM CARE	DATA SUN	IMARY-C	ALENDAR	YEAR 201	5	LTC PLANNII	NG ARE	ĒA	Tazewell		
HEALTH SERVICE	EAREA		002	-	DMISSIO	N RESTRICTI	ONS		RESIDENT	RESIDENTS BY PRIMARY DIAGNOSIS		
				Aggres	sive/Anti-S	Social		9	DIAGNOSIS			
TOTAL FACILITIE	S		18	Chroni	c Alcoholis	sm		11	Neoplasms	3	0	
HOSPITAL BASED	UNITS		0	Develo	pmentally	Disabled		3	Endocrine/l	Metabolic	0	
FREE STANDING	FACILITIES		18	Drug Addiction				12	Blood Diso	rders	0	
				Medica	id Recipie	nt		1	Nervous Sy	stem Non Alzheimer	0	
FACILITIES LICEN	ISED FOR:			Medica	re Recipie	ent		2	Alzheime	r Disease	0	
NURSING CA	RE BEDS ON	LY	10	Mental	Illness			2	Mental Illne	ess	0	
DD CARE BED	OS ONLY		7	Non-A	mbulatory			2	Developme	ental Disability	0	
MULTI-LICENS	SED FACILIT	IES	1	Non-M	obile			2	Circulatory	System	0	
				Public	Aid Recipi	ent		2 Respiratory System			0	
FACILITIES REPO	RTED BY			Under	65 Years (Old		0	Digestive S	•	0	
OWNERSHIP TYP	E			Unable	to Self-M	edicate		0	Genitourina	ary System Disorders	0	
GOVERNMEN	TAL OWNER	SHIP	0	Ventilator Dependent			18 Skin Dise			ders	0	
NON-PROFIT	OWNERSHIP		9	Infectious Disease w/ Isolation				7 Musculo-skeletal Disorders			0	
FOR PROFIT	OWNERSHIP		9	Other I	Restriction	S		2	Injuries and	d Poisonings	0	
				No Res	strictions			0	Other Medi	cal Conditions	0	
CONTINUING CAP	RE COMMUN	ITY	0						Non-Medic	al Conditions	0	
LIFE CARE FACIL	ITY		0						TOTALS		0	
									*Data Not C	Collected for 2015		
Reported Identi	fied Offende	's	25			Total F	Residents Dia	gnose	d with Mental	Illness	183	
	LICENSED	BEDS, BEI	S IN US	E, MEDICA	RE/MEDI	CAID CERTIFI	ED BEDS					
		PEAK	PEAK							ADMISSIONS AN	D	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICARE MEDICA		DISCHARGES - 20		
LEVEL OF CARE BEDS SET-UP		USED	SET-UP	IN USE	BEDS	CERTIFIED	OE	RTIFIED				

899

156

0

Nursing Care

Skilled Under 22

Intermediate DD

Sheltered Care

TOTAL BEDS

1,256

0

170

12

1,438

1,241

0

166

12

1,419

1,037

0

161

1,208

10

1,165

0

166

12

1,343

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

357

0

14

3

374

924

924

902

170

1072

0

	Med	icare	Medio	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	44,148	13.1%	158,310	48.1%	2,580	14,324	132,705	1,420	353,487	77.1%	78.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			55,792	89.9%	0	0	0	0	55,792	89.9%	92.1%
Sheltered Care					0	0	3,132	0	3,132	71.5%	71.5%
TOTALS	44,148	13.1%	214,102	54.7%	2,580	14,324	135,837	1,420	412,411	78.6%	79.6%

	NURSIN	IG CARE		INDER 22		RMED. DD		EMBER 31, 20 LTERED		OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	4	4	0	0	40	37	0	0	44	41	85
45 to 59	34	42	0	0	22	26	0	0	56	68	124
60 to 64	19	11	0	0	1	10	0	0	20	21	41
65 to 74	42	66	0	0	3	13	0	0	45	79	124
75 to 84	71	160	0	0	1	3	1	2	73	165	238
85+	93	353	0	0	0	0	2	4	95	357	452
TOTALS	263	636	0	0	67	89	3	6	333	731	1.064

Residents on 1/1/2015

Total Admissions 2015

Total Discharges 2015

Residents on 12/31/2015

1,124

2,376

2,434

1,066

LEVEL			Other		Private	Charity		AVERA	GE DAILY PA	YMENT RA	MENT RATES		
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF (CARE	SINGLE I	DOUBLE		
Nursing Care	110	470	5	32	278	4	899	Nursing Ca	ire	218	188		
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22		0	0		
ICF/DD		156	0	0	0	0	156	Intermediate DD		141	123		
Sheltered Care			0	0	9	0	9	Shelter		181	162		
TOTALS	110	626	5	32	287	4	1,064						
	RESIDEN	ITS BY RAC	IAL/ETHN	IICITY GRO	UPING				STAFFING				
		Nursing	Skilled		Shelte			EMPLOYM	FULL-TIME				
RACE		Care	Under 22	ICF/DE) Car	e -	Totals	CATEGORY		EQUIVALEN [*]			
Asian		0	0	0		0	0	Administrators		14.50			
American Indian		0	0	1		0	1	Physicians		0.00			
Black		36	0	7		0	43	Director of Nursing		1:	3.50		
Hawaiian/Pacific I	sl.	1	0	0		0	1	Registered Nurses		9	4.75		
White		862	0	148		9	1,019	LPN's		149.62			
Race Unknown		0	0	0		0	0	Certified Aide		510.01			
Total		899	0	156		9	1,064	Other Health		137.19			
								Non-Health S	taff	315.37			
		Nursing	Skilled		Shelte	red		Totals		123	4.94		
ETHNICITY		Care	Under 22	ICF/DE) Car	e .	Totals						
Hispanic		1	0	0		0	1						
Non-Hispanic		898	0	156		9	1,063						
Ethnicity Unknow	า	0	0	0		0	0						
Total		899	0	156		9	1,064						
			N	NET REVEN	IUE BY PA	AYOR SC	URCE (Fiscal Ye	ear Data)					
									Charity	Charity			
Medicare	M	1edicaid	Other Po		ate Insura		Private Pay	TOTALS Care		Expense as			
26.3%		35.2%		1.1%		.1%	30.3%	100.0%	Expense*	Total Net			
21,368,623		28,581,597	876,	641	5,791,9	905	24,648,676	81,267,442 254,484		0	.3%		

*Data Not Collected for 2015

120

21

Reported Identified Offenders

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	5
Nursing Care	590	589	547	589	495	95	438	590	Residents on 1/1/2015	546
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	616
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	613
Sheltered Care	55	54	50	54	26	29			Residents on 12/31/2015	549
TOTAL BEDS	645	643	597	643	521	124	438	590	-	

Total Residents Diagnosed with Mental Illness

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medio	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days (Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	11,188	7.0%	88,845	41.3%	2,143	957	80,394	447	183,974	85.4%	85.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	9,624	7	9,631	48.0%	48.9%
TOTALS	11,188	7.0%	88,845	41.3%	2,143	957	90,018	454	193,605	82.2%	82.5%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED .	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	19	7	0	0	0	0	0	0	19	7	26
45 to 59	30	20	0	0	0	0	0	0	30	20	50
60 to 64	14	8	0	0	0	0	0	0	14	8	22
65 to 74	16	21	0	0	0	0	0	1	16	22	38
75 to 84	28	64	0	0	0	0	0	0	28	64	92
85+	56	212	0	0	0	0	13	12	69	224	293
TOTALS	163	332	0	0	0	0	13	13	176	345	521

LEVEL			Other		Private	Charity		AVERA	GE DAILY PA	YMENT RA	ATES
OF CARE	Medicare	Medicaid	Public I	Insurance	Pay	Care	TOTALS	LEVEL OF (CARE	SINGLE	DOUBLE
Nursing Care	26	237	3	8	221	0	495	Nursing Ca	re	215	202
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	ler 22	0	0
ICF/DD		0	0	0	0	0	0	Intermedia	e DD	0	0
Sheltered Care			0	0	26	0	26	Shelter		122	104
TOTALS	26	237	3	8	247	0	521				
	RESIDEN	ITS BY RAC	IAL/ETHN	ICITY GRO	UPING				STAFFING	i	
		Nursing	Skilled		Shelter			EMPLOYM		FULL-TI	
RACE		Care	Under 22	ICF/DI	O Care	· 7	Γotals	CATEGO	PRY	EQUIVAL	LENT
Asian		1	0	0	()	1	Administrator	S		7.90
American Indian		0	0	0	()	0	Physicians			0.00
Black		7	0	0	()	7	Director of Nu	ırsing	7.00	
Hawaiian/Pacific	lsl.	0	0	0	()	0	Registered N	urses	5	0.00
White		483	0	0	26	3	509	LPN's		4	1.20
Race Unknown		4	0	0	()	4	Certified Aide	s	19	7.10
Total		495	0	0	26	<u> </u>	521	Other Health	Staff	4	7.70
								Non-Health S	taff	19	7.30
		Nursing	Skilled		Shelter	ed		Totals		54	8.20
ETHNICITY		Care	Under 22	ICF/DI			Totals				
Hispanic		3	0	0		0	3				
Non-Hispanic		492	0	0	2	6	518				
Ethnicity Unknow	n	0	0	0		0	0				
Total		495	0	0	2	6	521				
			N	IET REVEI	NUE BY PA	YOR SO	URCE (Fiscal Ye	ear Data)			
									Charity	Charity	
Medicare	M	1edicaid	Other Pu		vate Insurar		Private Pay	TOTALS	Care	Expense a	
17.7%		31.8%	1	.4%	0.1	1%	49.0%	100.0%	Expense*	Total Net	Revenue

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
17.7%	31.8%	1.4%	0.1%	49.0%	100.0%	Expense*	Total Net Revenue	
6,903,292	12,410,098	561,775	28,289	19,149,853	39,053,307	100,182	0.3%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
		Aggressive/Anti-Social	7	DIAGNOSIS	
TOTAL FACILITIES	11	Chronic Alcoholism	5	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	6	Endocrine/Metabolic	0
FREE STANDING FACILITIES	10	Drug Addiction	7	Blood Disorders	0
		Medicaid Recipient	1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	2	Alzheimer Disease	0
NURSING CARE BEDS ONLY	9	Mental Illness	5	Mental Illness	0
DD CARE BEDS ONLY	2	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	9	Skin Disorders	0
NON-PROFIT OWNERSHIP	7	Infectious Disease w/ Isolation	2	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	3	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	1	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	7	Total Residents	Diagnosed	with Mental Illness	245

Reported Identified Offenders 7 Total Residents

LICENSED BEDS, BEDS, IN USE, MEDICARE/MEDICAID CERTIFIED BEDS.

	LICENSED	DEDS, DEI	JS IN US	E, WEDICA	KE/WEDI	CAID CERTIFIE	D DED3			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AN DISCHARGES - 20	_
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents as 4/4/0045	4 007
Nursing Care	1,499	1,479	1,037	1,479	976	523	557	838	Residents on 1/1/2015 Total Admissions 2015	1,037 1.544
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	1,544
Intermediate DD	32	32	32	32	31	1		32	Residents on 12/31/2015	1,024
Sheltered Care	0	28	17	28	17	-17				1,024
TOTAL BEDS	1 531	1 539	1.086	1 539	1 024	507	557	870		

FACILITY UTILIZATION - 2015 BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Med Pat. days	icare Occ. Pct.	Medio		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	29,574	14.5%	115,455	37.7%	101	5,186	199,413	431	350,160	64.0%	64.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,192	95.8%	0	0	0	0	11,192	95.8%	95.8%
Sheltered Care					0	0	3,360	1,915	5,275	0.0%	51.6%
TOTALS	29,574	14.5%	126,647	39.9%	101	5,186	202,773	2,346	366,627	65.6%	65.3%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	6	4	0	0	6	5	11
45 to 59	25	7	0	0	4	7	0	0	29	14	43
60 to 64	18	8	0	0	3	1	1	0	22	9	31
65 to 74	50	55	0	0	2	2	0	2	52	59	111
75 to 84	181	128	0	0	2	0	1	1	184	129	313
85+	198	305	0	0	0	0	1	11	199	316	515
TOTALS	472	504	0	0	17	14	3	14	492	532	1,024

KES	IDEN 19 B	TPATIMEN	SOURC	E AND LEVE	EL OF CA	KE				
LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	, TOTALS	AVERAGE DAILY LEVEL OF CARE	' PAYMENT F SINGLE	RATES DOUBLE
Nursing Care	85	312	0	29	537	13	976	Nursing Care	294	270
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		31	0	0	0	0	31	Intermediate DD	117	117
Sheltered Care			0	0	10	7	17	Shelter	111	79
TOTALS	85	343	0	29	547	20	1,024			
	RESIDE	ITS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFF	ING	
RACE		Nursing Care	Skilled Under 2	2 ICF/DD	Shelte Car		Totals	EMPLOYMENT CATEGORY	FULL- EQUIV	
Asian		2	0	0		0	2	Administrators		10.50
American Indian		0	0	0		0	0	Physicians		2.10
Black		19	0	1		0	20	Director of Nursing		10.00
Hawaiian/Pacific	Isl.	0	0	0		0	0	Registered Nurses	1	58.68
White		955	0	30	1	17	1,002	LPN's	1	36.85
Race Unknown		0	0	0		0	0	Certified Aides	4	180.99
Total		976	0	31	1	17	1,024	Other Health Staff		57.60
								Non-Health Staff	5	556.94
		Nursing	Skilled		Shelte	ered		Totals	14	13.66
ETHNICITY		Care	Under 2	2 ICF/DE) Car	re	Totals			
Hispanic		2	0	1		0	3			

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

1,021

1,024

0

17

0

17

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
18.4%	25.1%	22.0%	2.5%	32.0%	100.0%	Expense*	Total Net Revenue	
12,270,546	16,777,842	14,661,876	1,677,677	21,398,693	66,786,634	2,054,615	3.1%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

0

0

0

30

0

974

976

0

Non-Hispanic

Total

Ethnicity Unknown

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 20	
Nursing Care	186	173	123	169	104	82	104	186	Residents on 1/1/2015	
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	
TOTAL BEDS	186	173	123	169	104	82	104	186	_	

FACILITY UTILIZATION - 2015 BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

15V51 05 04D5		icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	2,075	5.5%	16,384	24.1%	53	0	11,666	0	30,178	44.5%	47.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	2,075	5.5%	16,384	24.1%	53	0	11,666	0	30,178	44.5%	47.8%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECE	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	4	0	0	0	0	0	0	0	4	0	4
60 to 64	3	1	0	0	0	0	0	0	3	1	4
65 to 74	7	8	0	0	0	0	0	0	7	8	15
75 to 84	13	21	0	0	0	0	0	0	13	21	34
85+	11	36	0	0	0	0	0	0	11	36	47

0

0

0

0

38

66

0

0

TOTALS

38

66

104

	IDENTS B	Y PAYMENT		E AND LE									
LEVEL			Other		Priva		Charity				SE DAILY PA		
OF CARE	Medicare	Medicaid	Public	Insurance	e Pa	ıy	Care	TOTALS		LEVEL OF C	ARE	SINGLE [OUBLE
Nursing Care	5	58	2	0	3	9	0	104		Nursing Ca	re	207	155
Skilled Under 22	0	0	0	0		0	0	0		Skilled Und	er 22	0	0
ICF/DD		0	0	0		0	0	0		Intermediat	e DD	0	0
Sheltered Care			0	0		0	0	0		Shelter		0	0
TOTALS	5	58	2	0	3	9	0	104					
	RESIDE	NTS BY RAC	IAL/ETH	NICITY GR	OUPIN	G					STAFFING		
		Nursing	Skilled		_	heltere				EMPLOYM		FULL-TIN	
RACE		Care	Under 2	2 ICF/[DD	Care	Т	otals		CATEGO	RY	EQUIVAL	ENT
Asian		0	0		0	0		0	_	Administrators	S	2	2.00
American Indian		0	0		0	0		0		Physicians		(0.00
Black		0	0		0	0		0		Director of Nu	rsing	2	2.00
Hawaiian/Pacific I	sl.	0	0		0	0		0		Registered Nu	ırses	6	6.00
White		103	0		0	0		103		LPN's		12	2.00
Race Unknown		1	0		0	0		1		Certified Aide			6.00
Total		104	0	ı	0	0		104		Other Health			2.00
									_	Non-Health St	taff	39	0.00
		Nursing	Skilled		SI	heltere	d			Totals		99	0.00
ETHNICITY		Care	Under 2	2 ICF/I	DD	Care	Т	otals					
Hispanic		0	0		0	0		0					
Non-Hispanic		104	0	ı	0	0		104					
Ethnicity Unknown	า	0	0	1	0	0		0					
Total		104	0	ı	0	0		104					
				NET REV	ENUE B	Y PAY	OR SO	URCE (Fisc	cal Year Da	nta)			
											Charity	Charity	Care
Medicare	N	Medicaid	Other F	Public P	rivate In	suranc	ce	Private Pay	/	TOTALS	Care	Expense a	s % of
18.1%		38.4%		0.1%		0.09	%	43.49	%	100.0%	Expense*	Total Net F	Revenue
969,944		2,061,432	6	5,379		(0	2,328,610)	5,366,365	0	0.	0%

*Data Not Collected for 2015 Reported Identified Offenders 0

No Restrictions

Total Residents Diagnosed with Mental Illness

Other Medical Conditions

Non-Medical Conditions

TOTALS

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

0

0

CONTINUING CARE COMMUNITY

LIFE CARE FACILITY

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	15
Nursing Care	337	337	259	328	220	117	248	248	Residents on 1/1/2015	255
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	338
Intermediate DD	16	16	16	16	16	0		16	Total Discharges 2015	357
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	236
TOTAL BEDS	353	353	275	344	236	117	248	264	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	10,403	11.5%	47,005	51.9%	64	626	26,510	0	84,608	68.8%	68.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,403	11.5%	52,845	54.8%	64	626	26,510	0	90,448	70.2%	70.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	5	0	0	0	5	5
45 to 59	5	3	0	0	0	4	0	0	5	7	12
60 to 64	3	2	0	0	1	1	0	0	4	3	7
65 to 74	12	19	0	0	0	4	0	0	12	23	35
75 to 84	21	42	0	0	1	0	0	0	22	42	64
85+	25	88	0	0	0	0	0	0	25	88	113
TOTALS	66	154	0	0	2	14	0	0	68	168	236

O

0

0

0

40

_	IDENTS B	Y PAYMENT		E AND LE									
LEVEL OF CARE	Medicare	Medicaid	Other Public	Insuranc		Private Pay	Charity Care	TOTALS	9	AVERAC LEVEL OF C	SE DAILY PA		ATES Double
					6	-							
Nursing Care	35	114	0	0		71	0	220		Nursing Ca		178	151
Skilled Under 22	0	0	0	0		0	0	0		Skilled Und		0	0
ICF/DD		16	0	0		0	0	16		Intermediat	e DD	119	119
Sheltered Care			0	0		0	0	0	<u> </u>	Shelter		0	0
TOTALS	35	130	0	0		71	0	236	5				
	RESIDE	NTS BY RAC	IAL/ETH	NICITY G	ROUI	PING					STAFFING		
		Nursing	Skilled			Sheltere				EMPLOYM		FULL-TI	
RACE		Care	Under 2	2 ICF/	DD	Care	٦	Totals		CATEGO	RY	EQUIVAL	ENT.
Asian		1	0		0	0		1	_	Administrator	S		4.25
American Indian		0	0		0	0		0		Physicians		(0.00
Black		0	0		0	0		0		Director of Nu	rsing		4.00
Hawaiian/Pacific I	sl.	0	0		0	0		0		Registered No	ırses	20	0.91
White		219	0		16	0		235		LPN's		38.53	
Race Unknown		0	0		0	0		0		Certified Aide			9.69
Total		220	0	1	16	0		236		Other Health S			2.05 6.00
ETHNICITY		Nursing Care	Skilled Under 2	2 ICF	DD.	Sheltere Care		Γotals	_	Totals		28	5.43
Hispanic		0	0		0	C)	0					
Non-Hispanic		220	0		16	C)	236					
Ethnicity Unknow	า	0	0	ı	0	C)	0					
Total		220	0		16	C)	236					
				NET REV	ENU	E BY PA	OR SC	URCE (Fi	iscal Year Da	nta)			
											Charity	Charity	Care
Medicare	N	Medicaid	Other F	Public F	Privat	e Insuran	ce	Private Pa	ay	TOTALS	Care	Expense a	s % of
29.4%		39.3%		0.2%		1.4	%	29.	7%	100.0%	Expense*	Total Net I	Revenue
4,954,355		6,628,361	41	,783		228,55	1	5,006,0	98	16,859,148	0	0	.0%

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	1	DIAGNOSIS	
TOTAL FACILITIES	3	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	3	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	3	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	0	Total Residents	Diagnose	d with Mental Illness	8

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	150 0 16 0	135 0 16	121 0 16	129 0 16	102 0 16	48 0 0 0	150	150 0 16	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	114 141 137 118
TOTAL BEDS	166	151	137	145	118	48	150	166	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	care	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	4,243	7.7%	21,174	38.7%	0	0	13,243	0	38,660	70.6%	78.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,838	100.0%	0	0	0	0	5,838	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,243	7.7%	27,012	44.6%	0	0	13,243	0	44,498	73.4%	80.7%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	_TERED .	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	4	4	0	0	4	4	8
45 to 59	0	0	0	0	2	2	0	0	2	2	4
60 to 64	0	1	0	0	1	0	0	0	1	1	2
65 to 74	8	5	0	0	3	0	0	0	11	5	16
75 to 84	6	16	0	0	0	0	0	0	6	16	22
85+	14	52	0	0	0	0	0	0	14	52	66
TOTALS	28	74	0	0	10	6	0	0	38	80	118

	IDENTS B	Y PAYMENT		E AND LE									
LEVEL			Other		Priv		Charity				SE DAILY PA		
OF CARE	Medicare	Medicaid	Public	Insurance	e Pa	ау	Care	TOTALS		LEVEL OF C	ARE	SINGLE	DOUBLE
Nursing Care	7	60	0	0	3	35	0	102		Nursing Ca	re	209	172
Skilled Under 22	0	0	0	0		0	0	0		Skilled Und	er 22	0	0
ICF/DD		16	0	0		0	0	16		Intermediat	e DD	114	114
Sheltered Care			0	0		0	0	0		Shelter		0	0
TOTALS	7	76	0	0	3	35	0	118					
	RESIDE	NTS BY RAC	IAL/ETH	NICITY GF	OUPIN	IG					STAFFING		
		Nursing	Skilled		_	heltere				EMPLOYM		FULL-TI	
RACE		Care	Under 2	2 ICF/I	DD	Care	Т	otals		CATEGO	RY	EQUIVAL	ENT
Asian		0	0		0	0		0	_	Administrators	S		2.25
American Indian		0	0		0	0		0		Physicians			0.00
Black		0	0		2	0		2		Director of Nu	rsing		2.00
Hawaiian/Pacific I	sl.	0	0		1	0		1		Registered Nu	ırses		7.25
White		102	0	1	3	0		115		LPN's		2	1.25
Race Unknown		0	0		0	0		0		Certified Aides			7.00
Total		102	0	1	6	0		118		Other Health			2.00
									_	Non-Health St	taff	1	8.60
		Nursing	Skilled		s	heltere	d			Totals		11	0.35
ETHNICITY		Care	Under 2	2 ICF/		Care		otals					
Hispanic		0	0)	0	0		0					
Non-Hispanic		61	0) 1	6	0		77					
Ethnicity Unknow	n	41	0	1	0	0		41					
Total		102	0) 1	6	0		118					
				NET REV	ENUE E	BY PAY	OR SO	URCE (Fisc	al Year Da	ata)			
											Charity	Charity	Care
Medicare	ľ	Medicaid	Other F	Public P	rivate Ir	nsurano	e	Private Pay		TOTALS	Care	Expense a	
23.4%		37.1%		0.0%		0.09	%	39.6%	, 0	100.0%	Expense*	Total Net	Revenue
1,867,425		2,962,969		497		()	3,165,642		7,996,533	0	0	.0%

		PEAK	PEAK						ADMISSIONS AND)
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 201	15
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents of 4/4/0045	050
Nursing Care	472	429	323	409	272	200	348	450	Residents on 1/1/2015	350
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015 Total Discharges 2015	464 502
Intermediate DD	48	48	46	48	42	6		48	Residents on 12/31/2015	312
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2013	312

314 **FACILITY UTILIZATION - 2015**

457

TOTAL BEDS

520

477

369

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

206

348

498

LEVEL OF CARE	Medi Pat. days	icare Occ. Pct.	Medio		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	12,593	9.9%	61,540	37.5%	2,213	1,200	25,787	0	103,333	60.0%	66.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			15,366	87.7%	0	0	0	0	15,366	87.7%	87.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	12,593	9.9%	76,906	42.3%	2,213	1,200	25,787	0	118,699	62.5%	68.2%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	12	7	0	0	13	7	20
45 to 59	6	4	0	0	9	9	0	0	15	13	28
60 to 64	6	7	0	0	0	0	0	0	6	7	13
65 to 74	12	22	0	0	2	2	0	0	14	24	38
75 to 84	22	50	0	0	0	1	0	0	22	51	73
85+	36	106	0	0	0	0	0	0	36	106	142
TOTALS	83	189	0	0	23	19	0	0	106	208	314

LEVEL	_		Other		EL OF CAI Private	Charit	v		AVFR A	GE DAILY PA	YMENT RA	TES
	Medicare	Medicaid		Insurance	Pay	Care	•	.S	LEVEL OF C			DOUBLE
Nursing Care	40	145	4	7	76	0	272	2	Nursing Ca	re	196	169
Skilled Under 22	0	0	0	0	0	0	C)	Skilled Und	ler 22	0	0
ICF/DD		42	0	0	0	0	42	2	Intermediat	e DD	118	119
Sheltered Care			0	0	0	0	C)	Shelter		0	0
TOTALS	40	187	4	7	76	0	314	4				
	RESIDEI	NTS BY RAC	IAL/ETHN	ICITY GRO	DUPING					STAFFING		
RACE		Nursing Care	Skilled Under 22	ICF/D	Shelte D Car		Totals		EMPLOYM CATEGO		FULL-TII EQUIVAL	
Asian		0	0	()	0	0		Administrator	c		5.10
American Indian		0	0	(0	0		Physicians	3		0.00
Black		1	0	2		0	5		Director of Nu	ırsina		4.00
Hawaiian/Pacific I	sl.	0	0	(0	0		Registered N	ū		5.50
White		271	0	38	3	0	309		LPN's			6.00
Race Unknown		0	0	()	0	0		Certified Aide	s	12	4.00
Total		272	0	42	2	0	314		Other Health Non-Health S			2.80 9.16
		Nursing	Skilled		Shelte	red			Totals			6.56
ETHNICITY		Care	Under 22	l ICF/D			Totals					
Hispanic		0	0	1		0	1					
Non-Hispanic		272	0	41		0	313					
Ethnicity Unknown	า	0	0	C)	0	0					
Total		272	0	42	!	0	314					
			١	NET REVE	NUE BY PA	AYOR S	OURCE (F	iscal Year	Data)			
										Charity	Charity	Care
Medicare	ľ	Medicaid	Other Po	ublic Pri	vate Insura	ınce	Private P	Pay	TOTALS	Care	Expense a	as % of
22.3%		59.0%	C).9%	2	.1%	15.	.7%	100.0%	Expense*	Total Net I	Revenue
7,155,817		18,927,584	275,	737	680,5	534	5,017,1	138	32,056,810	0	0.	.0%

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	0	RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	0	DIAGNOSIS	
TOTAL FACILITIES	1	Chronic Alcoholism	0	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	1	Drug Addiction	0	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	1	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	1	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	1	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	2	Total Residents	Diagnose	d with Mental Illness	3

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 2019	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents on 4/4/0045	400
Nursing Care	119	119	115	119	115	4	119	119	Residents on 1/1/2015	106
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	119
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	110
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	115
TOTAL BEDS	119	119	115	119	115	4	119	119	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	caid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	5,092	11.7%	27,088	62.4%	325	178	6,882	0	39,565	91.1%	91.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	5,092	11.7%	27,088	62.4%	325	178	6,882	0	39,565	91.1%	91.1%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	0	0	0	0	0	1	1
45 to 59	1	2	0	0	0	0	0	0	1	2	3
60 to 64	2	2	0	0	0	0	0	0	2	2	4
65 to 74	5	10	0	0	0	0	0	0	5	10	15
75 to 84	9	24	0	0	0	0	0	0	9	24	33
85+	12	47	0	0	0	0	0	0	12	47	59
TOTALS	29	86	0	0	0	0	0	0	29	86	115

LEVEL			Other		Private	Charity			AVERAGE DAILY	PAYMENT R	ATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTAL	.S	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	13	76	2	0	24	0	115	5	Nursing Care	150	136
Skilled Under 22	0	0	0	0	0	0	()	Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	()	Intermediate DD	0	0
Sheltered Care			0	0	0	0	()	Shelter	0	0
TOTALS	13	76	2	0	24	0	115	5			
	RESIDEN	ITS BY RAC	IAL/ETH	NICITY GRO	UPING				STAFFI	NG	
RACE		Nursing Care	Skilled Under 2	2 ICF/DD	Shelte Car		Totals		EMPLOYMENT CATEGORY	FULL-T EQUIVA	
Asian		1	0	0		0	1		Administrators		1.00
American Indian		0	0	0		0	0		Physicians		0.00
Black		0	0	0		0	0		Director of Nursing		1.00
Hawaiian/Pacific I	sl.	0	0	0		0	0		Registered Nurses		3.87
White		114	0	0		0	114		LPN's	1	7.58
Race Unknown		0	0	0		0	0		Certified Aides	4	14.89
Total		115	C	0		0	115		Other Health Staff	3	36.50
									Non-Health Staff		0.00
ETHNICITY		Nursing Care	Skilled Under 2		Shelte Ca		Γotals		Totals	10)4.84
Hispanic		0	C	0		0	0				
Non-Hispanic		115	C	0		0	115				
Ethnicity Unknown	1	0	C	0		0	0				
Total		115	C	0		0	115				

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
33.3%	49.6%	0.6%	0.7%	15.9%	100.0%	Expense*	Total Net Revenue	
2,194,981	3,272,483	40,014	43,993	1,045,842	6,597,313	0	0.0%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS Aggressive/Anti-Social	2	RESIDENTS BY PRIMARY DIAGNO DIAGNOSIS	OSIS*
TOTAL FACILITIES	3	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	3	Drug Addiction	1	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	3	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	0	Total Residents	Diagnose	d with Mental Illness	3

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 2015	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D : 1	407
Nursing Care	184	135	120	135	101	83	184	184	Residents on 1/1/2015	127
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	174
Intermediate DD	16	16	16	16	16	0		16	Total Discharges 2015	184
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	117
TOTAL BEDS	200	151	136	151	117	83	184	200	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi	icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	3,390	5.0%	28,636	42.6%	0	27	8,013	0	40,066	59.7%	81.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,621	96.3%	0	0	0	0	5,621	96.3%	96.3%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,390	5.0%	34,257	46.9%	0	27	8,013	0	45,687	62.6%	82.9%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	3	4	0	0	3	4	7
45 to 59	1	0	0	0	4	1	0	0	5	1	6
60 to 64	1	2	0	0	0	0	0	0	1	2	3
65 to 74	5	6	0	0	1	2	0	0	6	8	14
75 to 84	3	21	0	0	0	1	0	0	3	22	25
85+	16	46	0	0	0	0	0	0	16	46	62
TOTALS	26	75	0	0	8	8	0	0	34	83	117

0

0

0

117

Director of Nursing

Registered Nurses

Other Health Staff

Non-Health Staff

Certified Aides

LPN's

Totals

0

0

0

101

Black

White

Hawaiian/Pacific Isl.

Race Unknown

2.00

10.25

10.00

44.00

4.00

43.00

115.50

RES	SIDENTS B	/ PAYMENT	SOURC	E AND LEVE	EL OF CA	RE				
LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT F	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	14	64	0	0	23	0	101	Nursing Care	164	152
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		16	0	0	0	0	16	Intermediate DD	112	112
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	14	80	0	0	23	0	117			
	RESIDEN	TS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFF	ING	
		Nursing	Skilled		Shelte	ered		EMPLOYMENT	FULL-	TIME
RACE		Care	Under 2	2 ICF/DD) Car	e -	Totals	CATEGORY	EQUIV	ALENT
Asian		0	C	0		0	0	Administrators		2.25
American Indian		0	C	0		0	0	Physicians		0.00

0

0

0

0

Total	101	0	16	0	117
ETHNICITY	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	101	0	16	0	117
Ethnicity Unknown	0	0	0	0	0
Total	101	0	16	0	117

0

0

0

0

0

0

16

0

NET REVENUE BY PAYOR SOURCE ((Fiscal Year Data)
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						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
22.0%	53.9%	0.2%	3.0%	20.9%	100.0%	Expense*	Total Net Revenue	
1,504,697	3,689,562	11,885	207,383	1,433,399	6,846,926	3,228	0.0%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

Jersey

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	1	DIAGNOSIS	
TOTAL FACILITIES	4	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	4	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	3	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	4	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	3	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	2	Total Residents	Diagnosed	l with Mental Illness	43

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	5
Nursing Care	369	369	293	369	282	87	369	369	Residents on 1/1/2015	290
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	375
Intermediate DD	16	16	16	16	16	0		16	Total Discharges 2015	367
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	298
TOTAL BEDS	385	385	309	385	298	87	369	385	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	13,316	9.9%	53,284	39.6%	1,164	847	29,728	0	98,339	73.0%	73.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,758	98.6%	0	0	0	0	5,758	98.6%	98.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	13,316	9.9%	59,042	42.0%	1,164	847	29,728	0	104,097	74.1%	74.1%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	0	0	0	4	2	0	0	6	2	8
45 to 59	2	3	0	0	4	4	0	0	6	7	13
60 to 64	5	7	0	0	1	0	0	0	6	7	13
65 to 74	13	25	0	0	1	0	0	0	14	25	39
75 to 84	26	61	0	0	0	0	0	0	26	61	87
85+	29	109	0	0	0	0	0	0	29	109	138
TOTALS	77	205	0	0	10	6	0	0	87	211	298

7,140,312

7,855,835

146,861

*Charity Expense does not include expenses which may be considered a community benefit.

LEVEL	.DEITIO D	Y PAYMENT	Other	MIND LEVE	Private	Charity		AVERAGE	ΠΔΙΙΥ ΡΔ	YMENT R	ATFS	
OF CARE	Medicare	Medicaid		nsurance	Pay	Care	TOTALS	LEVEL OF CAR			DOUBLE	
Nursing Care	43	150	3	8	78	0	282	Nursing Care		173	150	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 2	.2	0	0	
ICF/DD		16	0	0	0	0	16	Intermediate DI	D	0	114	
Sheltered Care			0	0	0	0	0	Shelter		0	0	
TOTALS	43	166	3	8	78	0	298					
	RESIDE	NTS BY RAC	IAL/ETHNI	CITY GRO	UPING			5	STAFFING			
RACE		Nursing Care	Skilled Under 22	ICF/DD	Shelter Care		Totals	EMPLOYMENT CATEGORY	Γ	FULL-T EQUIVA		
Asian		0	0	0		0	0	Administrators			3.25	
American Indian		0	0	0		0	0	Physicians			0.00	
Black		3	0	1		0	4	Director of Nursing		3.00		
Hawaiian/Pacific I	lsl.	0	0	0		0	0	Registered Nurses		2	20.25	
White		279	0	15		0	294	LPN's	•		26.00	
Race Unknown		0	0	0		0	0	Certified Aides		135.00		
Total		282	0	16		0	298	Other Health Staf	f		7.00	
								Non-Health Staff		9	92.00	
ETHNICITY		Nursing Care	Skilled Under 22	ICF/DD	Shelte Car		Totals	Totals		28	36.50	
Hispanic		0	0	0		0	0					
Non-Hispanic		282	0	16		0	298					
Ethnicity Unknow	n	0	0	0		0	0					
Total		282	0	16		0	298					
			N	ET REVEN	UE BY PA	YOR SC	OURCE (Fiscal Y	'ear Data)				
								(Charity	Charity	/ Care	
Medicare	N	/ledicaid	Other Pul	blic Priv	ate Insura	nce	Private Pay	TOTALS	Care	Expense		
35.7%		39.3%	0.	7%	2.	2%	22.0%	100.0% E	Expense*	Total Net	Revenue	

443,649

4,397,790

19,984,447

0

0.0%

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	5	DIAGNOSIS	
TOTAL FACILITIES	7	Chronic Alcoholism	4	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	3	Endocrine/Metabolic	0
FREE STANDING FACILITIES	7	Drug Addiction	6	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	3	Alzheimer Disease	0
NURSING CARE BEDS ONLY	4	Mental Illness	2	Mental Illness	0
DD CARE BEDS ONLY	3	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	6	Skin Disorders	0
NON-PROFIT OWNERSHIP	4	Infectious Disease w/ Isolation	3	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	3	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	1	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	0	Total Resident	s Diagnosed	l with Mental Illness	15

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		,		•						
		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 201	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D : 1	40.4
Nursing Care	468	459	373	459	330	138	349	461	Residents on 1/1/2015	404
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	470
Intermediate DD	48	48	48	48	46	2		48	Total Discharges 2015	498
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	376
TOTAL BEDS	516	507	421	507	376	140	349	509	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	13,509	10.6%	71,840	42.7%	1,372	2,375	37,585	0	126,681	74.2%	75.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			16,158	92.2%	0	0	240	0	16,398	93.6%	93.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	13,509	10.6%	87,998	47.4%	1,372	2,375	37,825	0	143,079	76.0%	77.3%

	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015												
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND		
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL		
Under 18	0	0	0	0	0	0	0	0	0	0	0		
18 to 44	1	1	0	0	8	6	0	0	9	7	16		
45 to 59	8	12	0	0	7	6	0	0	15	18	33		
60 to 64	10	4	0	0	3	3	0	0	13	7	20		
65 to 74	11	20	0	0	5	4	0	0	16	24	40		
75 to 84	21	55	0	0	1	3	0	0	22	58	80		
85+	41	146	0	0	0	0	0	0	41	146	187		
TOTALS	92	238	0	0	24	22	0	0	116	260	376		

Logan

LEVEL			Other		Private (Charity		AVERAC	GE DAILY P	AYMENT RA	TES	
OF CARE	Medicare	Medicaid	Public I	nsurance	Pay	Care	TOTALS	LEVEL OF C			OUBLE	
Nursing Care	36	173	5	8	108	0	330	Nursing Ca	re	193	176	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	ler 22	0	0	
ICF/DD		45	0	0	1	0	46	Intermediat	e DD	112	113	
Sheltered Care			0	0	0	0	0	Shelter		0	0	
TOTALS	36	218	5	8	109	0	376					
	RESIDE	NTS BY RAC	IAL/ETHNI	ICITY GROU	JPING				STAFFING			
		Nursing	Skilled		Sheltere			EMPLOYM		FULL-TIN		
RACE		Care	Under 22	ICF/DD	Care	7	otals	CATEGO	RY	EQUIVAL	ENT	
Asian		1	0	0	0		1	Administrators	S	5	5.50	
American Indian		0	0	0	0		0	Physicians		C	0.00	
Black		7	0	2	0		9	Director of Nursing		5	5.00	
Hawaiian/Pacific I	sl.	0	0	0	0		0			22.42		
White		322	0	44	0		366	LPN's		64.52		
Race Unknown		0	0	0	0		0	Certified Aide	s	186.55		
Total		330	0	46	0		376	Other Health	Staff	112	2.68	
								Non-Health S	taff	149	9.97	
		Nursing	Skilled		Sheltere	ed		Totals		546	6.64	
ETHNICITY		Care	Under 22	ICF/DD	Care		Γotals					
Hispanic		1	0	0	0		1					
Non-Hispanic		233	0	46	0		279					
Ethnicity Unknown	า	96	0	0	0		96					
Total		330	0	46	0		376					
			N	ET REVEN	UE BY PAY	OR SO	URCE (Fiscal Ye	ear Data)				
									Charity	Charity	Care	
Medicare	N	/ledicaid	Other Pu	ıblic Priva	ate Insuranc	ce	Private Pay	TOTALS	Care	Expense as	s % of	

3.7%

1,062,257

27.9%

7,985,101

100.0%

28,590,017

Expense*

0

Total Net Revenue

0.0%

*Charity Expense does not include expenses which may be considered a community benefit.

1.2%

354,152

42.8%

12,235,900

24.3%

6,952,607

Reported identified Offenders	0	

LICENSED BEDS, BEI	S IN USE, MEDICARE/MEDICAID CERTIFIED BEDS
55.44	DE 414

		PEAK	PEAK						ADMISSIONS AND	,
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 201	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D : 1	500
Nursing Care	744	669	568	669	521	223	541	742	Residents on 1/1/2015	528
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	716
Intermediate DD	16	16	16	16	13	3		16	Total Discharges 2015 Residents on 12/31/2015	710
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	534
TOTAL BEDS	760	685	584	685	534	226	541	758	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	19,361	9.8%	114,014	42.1%	172	2,069	41,192	13,795	190,603	70.2%	78.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,566	95.3%	0	0	0	0	5,566	95.3%	95.3%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	19,361	9.8%	119,580	43.2%	172	2,069	41,192	13,795	196,169	70.7%	78.5%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	3	1	0	0	3	2	5
45 to 59	13	7	0	0	3	5	0	0	16	12	28
60 to 64	11	8	0	0	1	0	0	0	12	8	20
65 to 74	30	38	0	0	0	0	0	0	30	38	68
75 to 84	40	101	0	0	0	0	0	0	40	101	141
85+	55	217	0	0	0	0	0	0	55	217	272
TOTALS	149	372	0	0	7	6	0	0	156	378	534

LEVEL			Other		Private	Charity	T0T110		GE DAILY PA		_	
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF C	CARE	SINGLE	DOUBLE	
Nursing Care	47	307	1	4	162	0	521	Nursing Ca	re	185	153	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	ler 22	0	0	
ICF/DD		13	0	0	0	0	13	Intermediat	e DD	0	116	
Sheltered Care			0	0	0	0	0	Shelter		0	0	
TOTALS	47	320	1	4	162	0	534					
	RESIDE	NTS BY RAC	IAL/ETHN	ICITY GRO	UPING				STAFFING			
		Nursing	Skilled		Shelter			EMPLOYM		FULL-TI		
RACE		Care	Under 22	ICF/DD	Care	e 7	otals	CATEGO	PRY	EQUIVAL	_ENT	
Asian		1	0	0		0	1	Administrator	S		8.25	
American Indian		0	0	0		0	0	Physicians		6.00		
Black		9	0	0		0	9	Director of Nursing			8.00	
Hawaiian/Pacific	lsl.	0	0	0		0	0	Registered Nurses		3	5.25	
White		510	0	13		0	523	LPN's			66.00	
Race Unknown		1	0	0		0	1	Certified Aide	s	228.00		
Total		521	0	13		0	534	Other Health	Staff	40.00		
								Non-Health S	taff	14	7.00	
		Nursing	Skilled		Shelte	red		Totals		53	8.50	
ETHNICITY		Care	Under 22	ICF/DE			Γotals					
Hispanic		1	0	0		0	1					
Non-Hispanic		520	0	13		0	533					
Ethnicity Unknow	n	0	0	0		0	0					
Total		521	0	13		0	534					
			N	NET REVEN	UE BY PA	YOR SC	URCE (Fiscal Ye	ear Data)				
									Charity	Charity	Care	
Medicare	N	/ledicaid	Other Po	ublic Priv	ate Insura	nce	Private Pay	TOTALS	Care	Expense a	as % of	
27.8%		41.6%	C).1%	1.	6%	28.9%	100.0%	Expense*	Total Net	Revenue	
9,052,060		13,553,348	27,	264	510,6	48	9,421,345	32,564,665	4,914	0	.0%	

Reported Identified Offenders

CONTINUING CARE COMMUNITY

LIFE CARE FACILITY

6

1

0

Total Residents Diagnosed with Mental Illness

Other Medical Conditions

*Data Not Collected for 2015

Non-Medical Conditions

TOTALS

33

0

0

0

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

No Restrictions

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	5
LEVEL OF CARE	DEDS	3L1-0F	USLD	3L 1-0F	III USL	BLDS	CENTIFIED	CENTIFIED	Residents on 1/1/2015	126
Nursing Care	164	160	123	160	109	55	84	164		_
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	137
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	139
Sheltered Care	31	16	16	16	15	16			Residents on 12/31/2015	124
TOTAL BEDS	195	176	139	176	124	71	84	164		

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	3,844	12.5%	24,274	40.6%	1,021	41	11,891	0	41,071	68.6%	70.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	5,026	0	5,026	44.4%	86.1%
TOTALS	3,844	12.5%	24,274	40.6%	1,021	41	16,917	0	46,097	64.8%	71.8%

	NURSING CARE		SKL UNDER 22		INTER	INTERMED. DD		SHELTERED		OTAL	GRAND	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	0	0	0	0	0	0	0	0	0	0	0	
45 to 59	2	2	0	0	0	0	0	0	2	2	4	
60 to 64	4	2	0	0	0	0	0	0	4	2	6	
65 to 74	5	13	0	0	0	0	0	0	5	13	18	
75 to 84	6	20	0	0	0	0	0	3	6	23	29	
85+	15	40	0	0	0	0	2	10	17	50	67	
TOTALS	32	77	0	0	0	0	2	13	34	90	124	

RES	SIDENTS BY	Y PAYMENT	SOURC	E AND LEV	EL OF CA	RE				
LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT F	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	12	59	2	0	36	0	109	Nursing Care	175	150
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0
Sheltered Care			0	0	15	0	15	Shelter	113	0
TOTALS	12	59	2	0	51	0	124			

RESI	DENTS BY RA	ACIAL/ETHNIC	ITY GROU	PING		STAFFI	NG
RACE	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Asian	1	0	0	0	1	Administrators	2.00
American Indian	0	0	0	0	0	Physicians	0.00
Black	1	0	0	0	1	Director of Nursing	2.00
Hawaiian/Pacific Isl.	0	0	0	0	0	Registered Nurses	13.00
White	107	0	0	15	122	LPN's	24.00
Race Unknown	0	0	0	0	0	Certified Aides	60.00
Total	109	0	0	15	124	Other Health Staff Non-Health Staff	0.00 64.00
ETHNICITY	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	Totals	165.00
Hispanic	0	0	0	0	0		
Non-Hispanic	109	0	0	15	124		
Ethnicity Unknown	0	0	0	0	0		
Total	109	0	0	15	124		

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
20.9%	40.0%	0.0%	4.6%	34.5%	100.0%	Expense*	Total Net Revenue	
1,627,586	3,117,843	0	359,589	2,686,459	7,791,477	0	0.0%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	1	DIAGNOSIS	
TOTAL FACILITIES	1	Chronic Alcoholism	1	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	1	Drug Addiction	1	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	1	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	1	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	0	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	2	Total Residents	Diagnose	d with Mental Illness	0

LICENSED BEDS.	. BEDS IN USE	. MEDICARE/MEDICAID	CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS ANI DISCHARGES - 20	15
Nursing Care	106	96	94	96	82	24	0	106	Residents on 1/1/2015 Total Admissions 2015	81 173
Skilled Under 22	0	0	0	0	0	0		0		_
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	172
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	82
TOTAL BEDS	106	96	94	96	82	24	0	106	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medic	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days (Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	3,056	0.0%	14,351	37.1%	0	0	14,144	0	31,551	81.5%	90.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,056	0.0%	14,351	37.1%	0	0	14,144	0	31,551	81.5%	90.0%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	2	1	0	0	0	0	0	0	2	1	3
60 to 64	0	1	0	0	0	0	0	0	0	1	1
65 to 74	2	7	0	0	0	0	0	0	2	7	9
75 to 84	6	16	0	0	0	0	0	0	6	16	22
85+	10	37	0	0	0	0	0	0	10	37	47
TOTALS	20	62	0	0	0	0	0	0	20	62	82

LEVEL			Other		Private	Charity		AVERA	GE DAILY PA	YMENT RA	TES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF (CARE	SINGLE I	DOUBLE
Nursing Care	7	27	0	4	44	0	82	Nursing Ca	ire	212	155
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	der 22	0	0
ICF/DD		0	0	0	0	0	0	Intermedia	te DD	0	0
Sheltered Care			0	0	0	0	0	Shelter		0	0
TOTALS	7	27	0	4	44	0	82				
	RESIDE	NTS BY RAC	IAL/ETHN	NICITY GRO	UPING				STAFFING		
		Nursing	Skilled		Shelte			EMPLOYM		FULL-TI	
RACE		Care	Under 22	2 ICF/DI) Car	е -	Γotals	CATEGO	DRY	EQUIVAL	.ENT
Asian		0	0	0		0	0	Administrator	'S	,	1.00
American Indian		0	0	0		0	0	Physicians			0.00
Black		2	0	0		0	2	Director of Nu	ursing		1.00
Hawaiian/Pacific	Isl.	0	0	0		0	0	Registered Nurses		2	1.00
White		80	0	0		0	80	LPN's		1:	2.00
Race Unknown		0	0	0		0	0	Certified Aide	es	40	0.00
Total		82	0	0		0	82	Other Health		;	3.00
								Non-Health S	staff	5	5.00
		Nursing	Skilled		Shelte	red		Totals		133	3.00
ETHNICITY		Care	Under 22	2 ICF/DI) Car	e ·	Totals				
Hispanic		0	0	0		0	0				
Non-Hispanic		82	0	0		0	82				
Ethnicity Unknow	'n	0	0	0		0	0				
Total		82	0	0		0	82				
			ı	NET REVE	NUE BY PA	AYOR SC	URCE (Fiscal Ye	ear Data)			
									Charity	Charity	Care
Medicare	N	/ledicaid	Other P	ublic Priv	/ate Insura	nce	Private Pay	TOTALS	Care	Expense a	s % of
27.3%		28.8%	(0.0%	0.	.0%	43.9%	100.0%	Expense*	Total Net I	Revenue
1,752,424		1,845,028		0		0	2,816,261	6,413,713	0	0	.0%

Reported Identified Offenders 16 Total Residents Diagnosed with Mental Illness

LICENSED BEDS. BEDS IN USE. MEDICARE/MEDICAID CERTIFIED BEDS

				_,						
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	
Nursing Care Skilled Under 22	490 0	467 0	414 0	465 0	397 0	93 0	335	490 0	Residents on 1/1/2015 Total Admissions 2015	395 466
Intermediate DD Sheltered Care	16 0	16 0	16 0	16 0	15 0	1 0		16	Total Discharges 2015 Residents on 12/31/2015	449 412
TOTAL BEDS	506	483	430	481	412	94	335	506	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	11,010	9.0%	94,307	52.7%	461	1,342	31,855	0	138,975	77.7%	81.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,599	95.9%	0	0	0	0	5,599	95.9%	95.9%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	11,010	9.0%	99,906	54.1%	461	1,342	31,855	0	144,574	78.3%	82.0%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	LTERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	9	1	0	0	4	6	0	0	13	7	20
45 to 59	18	12	0	0	2	3	0	0	20	15	35
60 to 64	20	10	0	0	0	0	0	0	20	10	30
65 to 74	33	29	0	0	0	0	0	0	33	29	62
75 to 84	45	49	0	0	0	0	0	0	45	49	94
85+	44	127	0	0	0	0	0	0	44	127	171
TOTALS	169	228	0	0	6	9	0	0	175	237	412

82

LEVEL	IDEN IS B	Y PAYMENT	Other	E AND LEV	Private			AVEDAGE	DAILY DA	VESTAL F	ATEC
OF CARE	Medicare	Medicaid	Public	Insurance	Private	Charity Care	TOTALS	LEVEL OF CA	E daily pa Re	SINGLE	DOUBLE
Nursing Care	41	250	4	5	97	0	397	Nursing Care		178	140
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under	22	0	0
ICF/DD		15	0	0	0	0	15	Intermediate	DD	0	107
Sheltered Care			0	0	0	0	0	Shelter		0	0
TOTALS	41	265	4	5	97	0	412				
	RESIDE	NTS BY RAC	IAL/ETHN	NICITY GRO	DUPING				STAFFING		
		Nursing	Skilled		Shelte			EMPLOYME		FULL-	
RACE		Care	Under 22	2 ICF/D	D Car	е	Totals	CATEGOR	Y	EQUIVA	ALENT
Asian		0	0	C)	0	0	Administrators			5.50
American Indian		0	0	C)	0	0	Physicians			0.00
Black		8	0	C)	0	8	Director of Nurs	ing		5.00
Hawaiian/Pacific I	sl.	0	0	C)	0	0	Registered Nurs	ses		13.25
White		389	0	15	;	0	404	LPN's			44.00
Race Unknown		0	0	C	1	0	0	Certified Aides		1	156.00
Total		397	0	15	;	0	412	Other Health St			11.00
								Non-Health Sta	ff	1	113.00
		Nursing	Skilled		Shelte	ered		Totals		3	347.75
ETHNICITY		Care	Under 22	2 ICF/D	D Cai	re	Totals				
Hispanic		0	0	0		0	0				
Non-Hispanic		332	0	15		0	347				
Ethnicity Unknown	า	65	0	0		0	65				
Total		397	0	15		0	412				
				NET REVE	NUE BY P	AYOR S	OURCE (Fiscal	Year Data)			
									Charity	Chari	ty Care
Medicare	N	Medicaid	Other P	ublic Pri	vate Insura	ince	Private Pay	TOTALS	Care	Expense	as % of
20.8%		42.0%		0.2%	2	.1%	34.9%	100.0%	Expense*	Total Ne	et Revenue
5,522,538		11,157,944	40	,095	565,2	296	9,283,904	26,569,777	0		0.0%

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	8	DIAGNOSIS	
TOTAL FACILITIES	10	Chronic Alcoholism	8	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	10	Drug Addiction	8	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	4	Alzheimer Disease	0
NURSING CARE BEDS ONLY	5	Mental Illness	3	Mental Illness	0
DD CARE BEDS ONLY	5	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	9	Skin Disorders	0
NON-PROFIT OWNERSHIP	5	Infectious Disease w/ Isolation	5	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	4	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	10	Total Residents	Diagnose	d with Mental Illness	23

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	5
Nursing Care	561	554	445	541	396	165	288	561	Residents on 1/1/2015	47
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	48
Intermediate DD	48	48	47	48	46	2		48	Total Discharges 2015	502
Sheltered Care	0	24	13	17	11	-11			Residents on 12/31/2015	453
TOTAL BEDS	609	626	505	606	453	156	288	609	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Med	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	16,769	16.0%	94,283	46.0%	0	2,533	36,261	0	149,846	73.2%	74.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			16,183	92.4%	0	0	0	0	16,183	92.4%	92.4%
Sheltered Care					0	0	3,000	0	3,000	0.0%	34.2%
TOTALS	16,769	16.0%	110,466	49.7%	0	2,533	39,261	0	169,029	76.0%	74.0%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	3	0	0	19	5	0	0	21	8	29
45 to 59	27	15	0	0	10	4	0	0	37	19	56
60 to 64	11	15	0	0	3	0	1	0	15	15	30
65 to 74	23	34	0	0	4	1	0	0	27	35	62
75 to 84	25	57	0	0	0	0	1	3	26	60	86
85+	34	150	0	0	0	0	0	6	34	156	190
TOTALS	122	274	0	0	36	10	2	9	160	293	453

LEVEL			Other		Private	Charity			AVERAC	SE DAILY PA	YMENT R	ATES
OF CARE	Medicare	Medicaid		nsurance	Pay	Care	TOTALS	S	LEVEL OF C		SINGLE	DOUBLE
Nursing Care	36	265	0	5	90	0	396		Nursing Ca	re	179	165
Skilled Under 22	0	0	0	0	0	0	0		Skilled Und	er 22	0	0
ICF/DD		46	0	0	0	0	46		Intermediat	e DD	190	158
Sheltered Care			0	0	11	0	11	_	Shelter		116	95
TOTALS	36	311	0	5	101	0	453					
	RESIDE	NTS BY RAC	IAL/ETHNI	CITY GROU	JPING					STAFFING	i	
		Nursing	Skilled	105/00	Sheltere				EMPLOYM		FULL-1	
RACE		Care	Under 22	ICF/DD	Care		Totals		CATEGO	RY	EQUIVA	LENI
Asian		2	0	0	0)	2		Administrators	3		6.61
American Indian		0	0	0	0)	0		Physicians			2.00
Black		8	0	7	0)	15		Director of Nursing			5.00
Hawaiian/Pacific	lsl.	0	0	0	0)	0		Registered Nurses			35.81
White		386	0	39	11		436		LPN's			55.50
Race Unknown		0	0	0	0)	0		Certified Aide			05.10
Total		396	0	46	11		453		Other Health			40.41
									Non-Health S	taff	1	23.30
		Nursing	Skilled		Sheltere	ed			Totals		4	73.73
ETHNICITY		Care	Under 22	ICF/DD	Care	•	Totals					
Hispanic		0	0	1	()	1					
Non-Hispanic		396	0	45	11	I	452					
Ethnicity Unknow	n	0	0	0	()	0					
Total		396	0	46	11		453					
			N	ET REVEN	UE BY PA	YOR SC	URCE (Fi	iscal Year	r Data)			
										Charity	Charit	y Care
Medicare	1	Medicaid	Other Pu	blic Priva	ate Insuran	се	Private Pa	ay	TOTALS	Care	Expense	as % of
27.3%		44.3%	1.	.1%	2.4	%	24.8	8%	100.0%	Expense*	Total Ne	t Revenue
8,648,144		14,032,656	354,2	242	767,34	-0	7,841,20	03	31,643,585	0		0.0%

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*	
		Aggressive/Anti-Social	12	DIAGNOSIS		
TOTAL FACILITIES	19	Chronic Alcoholism	9	Neoplasms	0	
HOSPITAL BASED UNITS	1	Developmentally Disabled	4	Endocrine/Metabolic	0	
FREE STANDING FACILITIES	18	Drug Addiction	11	Blood Disorders	0	
		Medicaid Recipient	3	Nervous System Non Alzheimer	0	
FACILITIES LICENSED FOR:		Medicare Recipient	7	Alzheimer Disease	0	
NURSING CARE BEDS ONLY	10	Mental Illness	5	Mental Illness	0	
DD CARE BEDS ONLY	6	Non-Ambulatory	1	Developmental Disability	0	
MULTI-LICENSED FACILITIES	3	Non-Mobile	1	Circulatory System	0	
		Public Aid Recipient	1	Respiratory System	0	
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0	
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0	
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	16	Skin Disorders	0	
NON-PROFIT OWNERSHIP	12	Infectious Disease w/ Isolation	6	Musculo-skeletal Disorders	0	
FOR PROFIT OWNERSHIP	7	Other Restrictions	0	Injuries and Poisonings	0	
		No Restrictions	3	Other Medical Conditions	0	
CONTINUING CARE COMMUNITY	3			Non-Medical Conditions	0	
LIFE CARE FACILITY	5			TOTALS	0	
				*Data Not Collected for 2015		
Reported Identified Offenders	37	7 Total Residents Diagnosed with Mental Illness 2				

LICENSED BEDS. BEDS IN USE. MEDICARE/MEDICAID CERTIFIED BEDS

		,		_,		0,42 02.11.11.12	2 2220			
LEVEL OF CARE	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AN DISCHARGES - 20	_
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Residents on 1/1/2015	1.219
Nursing Care	1,290	1,197	1,092	1,139	953	337	833	773		, -
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	3,527
Intermediate DD	179	178	166	178	156	23		179	Total Discharges 2015	3,576
Sheltered Care	109	98	73	98	59	50			Residents on 12/31/2015	1,170
TOTAL BEDS	1,578	1,473	1,331	1,415	1,168	410	833	952	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Med	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	51,763	17.0%	134,957	47.8%	696	15,929	128,570	2,890	334,805	71.1%	76.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			55,057	84.3%	0	0	730	0	55,787	85.4%	85.9%
Sheltered Care					0	0	11,584	7,952	19,536	49.1%	54.6%
TOTALS	51,763	17.0%	190,014	54.7%	696	15,929	140,884	10,842	410,128	71.2%	76.3%

	INLOIL	CINIO DI AGE GROCI, S	LA AND LLVLL OF CAN	L - DECEMBER 31, 20	13
	NURSING CARE	SKL UNDER 22	INTERMED. DD	SHELTERED	
AGE GROUPS	Male Female	Male Female	Male Female	Male Female	

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	5	2	0	0	31	15	0	0	36	17	53
45 to 59	34	13	0	0	50	17	0	0	84	30	114
60 to 64	36	30	0	0	13	0	0	1	49	31	80
65 to 74	55	72	0	0	20	4	0	1	75	77	152
75 to 84	76	166	0	0	5	0	12	6	93	172	265
85+	105	361	0	0	1	0	5	34	111	395	506
TOTALS	311	644	0	0	120	36	17	42	448	722	1,170

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS	AVERAGE DAILY LEVEL OF CARE	PAYMENT F	RATES DOUBLE
Nursing Care	128	417	0	48	353	7	953	Nursing Care	258	236
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		154	0	0	2	0	156	Intermediate DD	212	125
Sheltered Care			0	0	56	3	59	Shelter	162	169
TOTALS	128	571	0	48	411	10	1,168			
	RESIDEN	ITS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFFI	NG	
RACE		Nursing Care	Skilled Under 2	2 ICF/DD	Shelte Car		Totals	EMPLOYMENT CATEGORY	FULL- EQUIV	
Asian		8	0	0		0	8	Administrators		15.33
American Indian		1	0	0		0	1	Physicians		4.33
Black		64	0	13		0	77	Director of Nursing		14.00
Hawaiian/Pacific Is	sl.	0	0	0		1	1	Registered Nurses	1	03.48
White		822	0	143	5	i8 ′	1,023	LPN's	1	88.03
Race Unknown		60	0	0		0	60	Certified Aides	5	44.75
Total		955	0	156	5	i8 ^	1,170	Other Health Staff	1	39.96
							•	Non-Health Staff	3	84.06
		Nursing	Skilled		Shelte	red		Totals	13	93.94
ETHNICITY		Care	Under 2	2 ICF/DE) Car	e 1	Γotals			
Hispanic		2	0	1		0	3			
Non-Hispanic		774	0	155	;	36	965			
Ethnicity Unknown	1	179	0	0	2	23	202			

1,170

59

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
29.6%	27.9%	0.7%	9.6%	32.2%	100.0%	Expense*	Total Net Revenue	
27,557,964	25,943,536	669,361	8,919,730	30,004,100	93,094,691	812,732	0.9%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

0

156

955

Total

ILLINOIS LONG-TERM CARE DATA SUI	VIVIAR 1-CA	LENDAR FEAR 2015 LTC PLAI	NNING ARE	A Champaign	
HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	5	DIAGNOSIS	
TOTAL FACILITIES	8	Chronic Alcoholism	5	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	3	Endocrine/Metabolic	0
FREE STANDING FACILITIES	8	Drug Addiction	5	Blood Disorders	0
		Medicaid Recipient	2	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	6	Mental Illness	3	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	1	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	1	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	1	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	1	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	7	Skin Disorders	0
NON-PROFIT OWNERSHIP	3	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	4	Other Restrictions	2	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders 14 Total Residents Diagnos				with Mental Illness	22

	LICENSED	BEDS, BEI	OS IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	D BEDS			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 20	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED		. •
Nursing Care	908	865	715	852	638	270	845	685	Residents on 1/1/2015 Total Admissions 2015	4
Skilled Under 22	123	123	118	123	118	5		123	Total Discharges 2015	1,
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2015	١,
Sheltered Care	19	19	16	19	14	5			Residents on 12/31/2015	

770

TOTAL BEDS

1,050

1,007

849

994

FACILITY UTILIZATION - 2015 BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

280

845

808

	Med		Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	20,446	6.6%	100,537	40.2%	1,568	21,769	55,687	30	200,037	60.4%	63.4%
Skilled Under 22			40,999	91.3%	0	0	365	68	41,432	92.3%	92.3%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	5,312	0	5,312	76.6%	76.6%
TOTALS	20,446	6.6%	141,536	48.0%	1,568	21,769	61,364	98	246,781	64.4%	67.1%

	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015												
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND		
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL		
Under 18	0	0	7	5	0	0	0	0	7	5	12		
18 to 44	1	0	40	31	0	0	0	0	41	31	72		
45 to 59	14	22	9	11	0	0	0	0	23	33	56		
60 to 64	13	9	2	3	0	0	0	0	15	12	27		
65 to 74	44	46	4	2	0	0	0	0	48	48	96		
75 to 84	45	111	2	1	0	0	0	1	47	113	160		
85+	62	253	0	1	0	0	5	8	67	262	329		
TOTALS	179	441	64	54	0	0	5	9	248	504	752		

788 1,582 1,620 750

19,330

0.0%

62,403,550

10,475,225

22,651,384

446,964

*Charity Expense does not include expenses which may be considered a community benefit.

LEVEL			Other		Private	Charity		AVERAG	SE DAILY PA	AYMENT R	ATES	
OF CARE	Medicare	Medicaid	Public I	nsurance	Pay	Care	TOTALS	LEVEL OF C	CARE	SINGLE	DOUBLE	
Nursing Care	72	335	0	51	155	1	614	Nursing Ca	re	244	199	
Skilled Under 22	0	117	0	0	1	0	118	Skilled Und	ler 22	0	260	
ICF/DD		0	0	0	0	0	0	Intermediat	e DD	0	0	
Sheltered Care			0	0	14	0	14	Shelter		204	166	
TOTALS	72	452	0	51	170	1	746					
	RESIDEN	ITS BY RAC	IAL/ETHN	ICITY GRO	UPING				STAFFING	i		
		Nursing	Skilled		Shelte			EMPLOYM		FULL-TIME		
RACE		Care	Under 22	ICF/DD) Car	e 7	Totals	CATEGO	EQUIVA	EQUIVALENT		
Asian		9	1	0		0	10	Administrator		9.00		
American Indian		2	0	0		0	2	Physicians			0.50	
Black		107	27	0		0	134	Director of Nu	ırsing		9.00	
Hawaiian/Pacific I	lsl.	0	0	0		0	0	Registered N	egistered Nurses		80.50	
White		484	90	0	1	4	588	LPN's			86.50	
Race Unknown		18	0	0		0	18	Certified Aide	s	3	344.80	
Total		620	118	0	1	4	752	Other Health		58.20		
								Non-Health S	taff	2	79.40	
		Nursing	Skilled		Shelte	red		Totals		8	67.90	
ETHNICITY		Care	Under 22	ICF/DE) Car	е -	Γotals					
Hispanic		3	8	0		0	11					
Non-Hispanic		596	110	0	1	14	720					
Ethnicity Unknow	n	21	0	0		0	21					
Total		620	118	0	1	14	752					
			N	IET REVEN	IUE BY PA	YOR SO	URCE (Fiscal Ye	ear Data)				
									Charity	Charit	y Care	
Medicare	N	/ledicaid	Other Pu	ıblic Priv	ate Insura	nce	Private Pay	TOTALS	Care	Expense	Expense as % of	
16.8%		36.3%	0	.7%	13.	5%	32.7%	100.0%	Expense*	Total Net	t Revenue	

8,449,166

20,380,811

Infectious Disease w/ Isolation

Other Restrictions

No Restrictions

Reported Identified Offenders

NON-PROFIT OWNERSHIP

FOR PROFIT OWNERSHIP

CONTINUING CARE COMMUNITY

LIFE CARE FACILITY

Total Residents Diagnosed with Mental Illness

49

0

O

0

0

0

Musculo-skeletal Disorders

Injuries and Poisonings

Other Medical Conditions

*Data Not Collected for 2015

Non-Medical Conditions

TOTALS

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

2

1

0

1

4

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	5
Nursing Care	245	245	197	245	165	80	130	235	Residents on 1/1/2015	181
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	331
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	347
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	165
TOTAL BEDS	245	245	197	245	165	80	130	235	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi		Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	6,286	13.2%	19,613	22.9%	0	81	28,991	0	54,971	61.5%	61.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	6,286	13.2%	19,613	22.9%	0	81	28,991	0	54,971	61.5%	61.5%

RESIDENTS BY AGE GROUP. SEX AND LEVEL OF CARE - DECEMBER 31. 2015	RESIDENTS BY	AGE GROUP. S	SEX AND LEVEL	OF CARE	- DECEMBER 31, 2015
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	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	SHELTERED		TOTAL	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female 0 0 4 5 12 26 71	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	4	4	0	0	0	0	0	0	4	4	8
60 to 64	4	5	0	0	0	0	0	0	4	5	9
65 to 74	6	12	0	0	0	0	0	0	6	12	18
75 to 84	14	26	0	0	0	0	0	0	14	26	40
85+	19	71	0	0	0	0	0	0	19	71	90
TOTALS	47	118	0	0	0	0	0	0	47	118	165

RES LEVEL	IDENTS B	Y PAYMENT	SOURC Other	E AND LE	/EL OF C/ Private		o rito (AVED 44	SE DAILY PA	VMENT DA	TEC	
OF CARE	Medicare	Medicaid	Public	Insurance	Private	Cha Ca	,	OTALS	LEVEL OF C			DOUBLE	
Nursing Care	14	78	2	1	70		0	165	Nursing Ca	re	147	132	
Skilled Under 22	0	0	0	0	0		0	0	Skilled Und	er 22	0	0	
ICF/DD		0	0	0	0		0	0	Intermediat	e DD	0	0	
Sheltered Care			0	0	0		0	0	Shelter		0	0	
TOTALS	14	78	2	1	70		0	165					
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GR	OUPING					STAFFING			
		Nursing	Skilled		Shelt				EMPLOYM		FULL-TIME		
RACE		Care	Under 22	2 ICF/D	D Ca	ire	Tota	als	CATEGORY		EQUIVALENT		
Asian		0	0		0	0		0	Administrators		3.00		
American Indian		0	0		0	0		0	Physicians		0.00		
Black		0	0		0	0		0	Director of Nursing		;	3.00	
Hawaiian/Pacific I	lsl.	0	0		0	0		0	Registered Nurses		16.00		
White		165	0		0	0	10	65	LPN's		24.00		
Race Unknown		0	0		0	0		0	Certified Aides		81.00		
Total		165	0		0	0	1	 65	Other Health		18.00		
									Non-Health S	taff	7	6.00	
		Nursing	Skilled		Shelt	ered			Totals		22	1.00	
ETHNICITY		Care	Under 2	2 ICF/E		are	Tota	als					
Hispanic		0	0	()	0		0					
Non-Hispanic		165	0	()	0	1	65					
Ethnicity Unknow	n	0	0	()	0		0					
Total		165	0	()	0	1	65					
				NET REVE	NUE BY F	AYOR	SOUF	RCE (Fiscal Ye	ear Data)				
										Charity	Charity	Care	
Medicare	N	Medicaid	Other F	Public Pi	ivate Insur	ance	Pri	ivate Pay	TOTALS	Care	Expense a	as % of	
28.0%		34.7%		0.0%		1.1%		36.2%	100.0%	Expense*	Total Net	Revenue	
3,190,976		3,950,464		0	122	,681	4	1,127,062	11,391,183	0	0	.0%	

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	4	RESIDENTS BY PRIMARY DIAGN	OSIS*
	•	Aggressive/Anti-Social	4	DIAGNOSIS	
TOTAL FACILITIES	8	Chronic Alcoholism	1	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	8	Drug Addiction	4	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	8	Mental Illness	2	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	1	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	8	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	7	Other Restrictions	3	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	2			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	23	Total Residents	Diagnose	d with Mental Illness	125

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	015
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	939 0 0 0	812 0 0	685 0 0	812 0 0	587 0 0	352 0 0 0	821	924 0 0	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	585 1,314 1,312 587
TOTAL BEDS	939	812	685	812	587	352	821	924	=	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

. = . = = =		icare	Medic		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days (Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	30,662	10.2%	118,950	35.3%	5,795	3,589	54,232	0	213,228	62.2%	71.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	30,662	10.2%	118,950	35.3%	5,795	3,589	54,232	0	213,228	62.2%	71.9%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	4	0	0	0	0	0	0	2	4	6
45 to 59	33	32	0	0	0	0	0	0	33	32	65
60 to 64	16	21	0	0	0	0	0	0	16	21	37
65 to 74	41	46	0	0	0	0	0	0	41	46	87
75 to 84	47	83	0	0	0	0	0	0	47	83	130
85+	49	213	0	0	0	0	0	0	49	213	262
TOTALS	188	399	0	0	0	0	0	0	188	399	587

LEVEL			Other		Private	Charit	V		AVERAC	SE DAILY PA	YMENT RA	TES	
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	,	LS	LEVEL OF C			OUBLE	
Nursing Care	82	322	10	10	163	0	58	87	Nursing Ca	re	173	146	
Skilled Under 22	0	0	0	0	0	0		0	Skilled Und	er 22	0	0	
ICF/DD		0	0	0	0	0		0	Intermediat	e DD	0	0	
Sheltered Care			0	0	0	0		0	Shelter		0	0	
TOTALS	82	322	10	10	163	0	58	87					
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GRO	UPING					STAFFING			
		Nursing	Skilled		Shelte				EMPLOYM		FULL-TIN		
RACE		Care	Under 22	2 ICF/DI	O Car	е	Totals		CATEGO	RY	EQUIVAL	ENT	
Asian		0	0	C		0	0	=	Administrator	S	3	3.00	
American Indian		0	0	C		0	0		Physicians		Physicians 0.0		0.00
Black		12	0	C		0	12		Director of Nursing		8.00		
Hawaiian/Pacific I	sl.	1	0	C		0	1		Registered Nurses		49	9.00	
White		573	0	C		0	573		LPN's		88	3.00	
Race Unknown		1	0	C	<u> </u>	0	1		Certified Aides 27			.00	
Total		587	0	C		0	587		Other Health			7.00	
									Non-Health S	tarr		5.00	
		Nursing Care	Skilled Under 2	2 ICF/D	Shelte D Ca		Totals		Totals		647	7.00	
ETHNICITY		Cale	Under 2	2 ICF/D	D Ca	ie	Totals	=					
Hispanic		1	0	0		0	1						
Non-Hispanic		586	0	_		0	586						
Ethnicity Unknown	า	0	0	0		0	0	_					
Total		587	0	0		0	587						
				NET REVE	NUE BY P	AYOR S	OURCE ((Fiscal Year D	Data)				
										Charity	Charity	Care	
Medicare	N	Medicaid	Other F	ublic Pri	vate Insura	ance	Private	Pay	TOTALS	Care	Expense a	s % of	
36.8%		36.4%		1.7%	4	.8%	2	0.3%	100.0%	Expense*	Total Net F	Revenue	
15,707,992		15,538,065	740	,752	2,071,	163	8,672	.,957	42,730,929	0	0.	0%	

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	0	DIAGNOSIS	
TOTAL FACILITIES	2	Chronic Alcoholism	1	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	2	Drug Addiction	1	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	2	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	0	Total Residents	Diagnosed	l with Mental Illness	0

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care	190	187	179	187	172	18	134	185	Residents on 1/1/2015 Total Admissions 2015	162
Skilled Under 22	0	0	0	0	0	0		0		316
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	306
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	172
TOTAL BEDS	190	187	179	187	172	18	134	185	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE		icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	8,203	16.8%	230,223	340.9%	0	331	21,479	0	260,236	375.3%	381.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	8,203	16.8%	230,223	340.9%	0	331	21,479	0	260,236	375.3%	381.3%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	LTERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	1	2	0	0	0	0	0	0	1	2	3
60 to 64	0	2	0	0	0	0	0	0	0	2	2
65 to 74	11	14	0	0	0	0	0	0	11	14	25
75 to 84	10	24	0	0	0	0	0	0	10	24	34
85+	22	86	0	0	0	0	0	0	22	86	108
TOTALS	44	128	0	0	0	0	0	0	44	128	172

LEVEL			Other		Private	Charit	V		AVERAG	E DAILY PA	YMENT RA	TES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTAL	LS	LEVEL OF C	ARE	SINGLE D	OUBLE
Nursing Care	20	83	0	2	67	0	17:	2	Nursing Car	е	174	173
Skilled Under 22	0	0	0	0	0	0		0	Skilled Unde	er 22	0	0
ICF/DD		0	0	0	0	0		0	Intermediate	e DD	0	0
Sheltered Care			0	0	0	0	-	0	Shelter		0	0
TOTALS	20	83	0	2	67	0	17	2				
	RESIDE	NTS BY RAC	IAL/ETHN	NICITY GR	OUPING					STAFFING		
RACE		Nursing Care	Skilled Under 22	2 ICF/D	Shelte D Ca		Totals		EMPLOYMI CATEGO		FULL-TIN EQUIVAL	
Asian		0	0	()	0	0		Administrators	,	3	3.00
American Indian		0	0	()	0	0		Physicians 0.0		0.00	
Black		0	0	()	0	0		Director of Nursing		2.00	
Hawaiian/Pacific I	sl.	0	0	()	0	0		Registered Nurses		13	3.00
White		172	0	()	0	172		LPN's		25	5.00
Race Unknown		0	0	()	0	0		Certified Aides	3	89	0.00
Total		172	0	()	0	172		Other Health St			0.00 6.00
ETHNICITY		Nursing Care	Skilled Under 22	2 ICF/D	Shelte D Ca		Totals		Totals		218	3.00
Hispanic		0	0	()	0	0					
Non-Hispanic		172	0	()	0	172					
Ethnicity Unknow	n	0	0	()	0	0					
Total		172	0	()	0	172					
				NET REVE	NUE BY P	AYOR S	OURCE (I	Fiscal Ye	ear Data)			
										Charity	Charity	Care
Medicare	N	/ledicaid	Other P		ivate Insur		Private F	•	TOTALS	Care	Expense a	
35.4%		31.1%		0.4%	3	3.2%		9.9%	100.0%	Expense*	Total Net F	
4,965,836		4,361,778	53	,174	448,	459	4,186,	636	14,015,883	0	0.	0%

Reported Identified Offenders	6	Total Residents Diagnosed with Mental Illness

LICENSED BEDS.	BEDS IN U	ISE. MEDICARE/MEDICAID	CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	15
Nursing Care	233	233	189	233	165	68	181	231	Residents on 1/1/2015	179
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	174
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	188
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	165
TOTAL BEDS	233	233	189	233	165	68	181	231	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	care	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	4,884	7.4%	41,734	49.5%	364	717	15,005	0	62,704	73.7%	73.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,884	7.4%	41,734	49.5%	364	717	15,005	0	62,704	73.7%	73.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	14	12	0	0	0	0	0	0	14	12	26
60 to 64	4	7	0	0	0	0	0	0	4	7	11
65 to 74	11	17	0	0	0	0	0	0	11	17	28
75 to 84	7	22	0	0	0	0	0	0	7	22	29
85+	11	60	0	0	0	0	0	0	11	60	71
TOTALS	47	118	0	0	0	0	0	0	47	118	165

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_	IDENTS B	Y PAYMENT		E AND LEV				AVEDAGE DAWY	DAVMENT :	
LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS	AVERAGE DAILY LEVEL OF CARE	PAYMENI I SINGLE	DOUBLE
Nursing Care	10	109	0	2	44	0	165	Nursing Care	182	136
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	10	109	0	2	44	0	165			
	RESIDEN	NTS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFFIN	IG	
		Nursing	Skilled		Shelte			EMPLOYMENT	FULL-	
RACE		Care	Under 22	2 ICF/DI) Car	е	Totals	CATEGORY	EQUIV	ALENT
Asian		0	0	0		0	0	Administrators		3.00
American Indian		0	0	0		0	0	Physicians		0.00
Black		3	0	0		0	3	Director of Nursing		3.00
Hawaiian/Pacific I	sl.	0	0	0		0	0	Registered Nurses		13.00
White		161	0	0		0	161	LPN's		24.00
Race Unknown		1	0	0		0	1	Certified Aides		57.00
Total		165	0	0		0	165	Other Health Staff		22.00
								Non-Health Staff		61.00
		Nursing	Skilled		Shelte	red		Totals	,	183.00
ETHNICITY		Care	Under 22	2 ICF/DI			Totals			
Hispanic		2	0	0		0	2			
Non-Hispanic		163	0	0		0	163			
Ethnicity Unknown	า	0	0	0		0	0			
Total		165	0	0		0	165			
				NET REVE	NUE BY PA	YOR SO	OURCE (Fiscal	Year Data)		
								Charity	Chari	ty Care
Medicare	N	/ledicaid	Other P	ublic Pri	vate Insura	nce	Private Pay	TOTALS Care	Expense	e as % of
24.5%		45.0%		0.0%	7.	3%	23.3%	100.0% Expense	* Total Ne	et Revenue
2,450,018		4,498,756		0	727,5	03	2,325,647	10,001,924 0		0.0%

ILLINOIS LONG-TERM CARE DATA SUI	MMARY-CA	LENDAR YEAR 2015 LTC F	PLANNING AREA	A Edgar	
HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	4	DIAGNOSIS	
TOTAL FACILITIES	5	Chronic Alcoholism	4	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	5	Drug Addiction	4	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	2	Alzheimer Disease	0
NURSING CARE BEDS ONLY	3	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	2	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	5	Skin Disorders	0
NON-PROFIT OWNERSHIP	2	Infectious Disease w/ Isolation	2	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	3	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	

Reported Identified Offenders	1	Total Residents Diagnosed with Mental Illness

	LICENSED	BEDS, BEI	DS IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	ED BEDS			
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	i
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	299 0 32 0	279 0 32 0	236 0 32 0	279 0 32 0	221 0 32 0	78 0 0 0	255	279 0 32	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	262 421 430 253
TOTAL BEDS	331	311	268	311	253	78	255	311	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	8,523	9.2%	44,045	43.3%	3,035	1,303	22,949	0	79,855	73.2%	78.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,680	100.0%	0	0	0	0	11,680	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	8,523	9.2%	55,725	49.1%	3,035	1,303	22,949	0	91,535	75.8%	80.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	10	5	0	0	10	6	16
45 to 59	3	4	0	0	8	6	0	0	11	10	21
60 to 64	3	4	0	0	0	1	0	0	3	5	8
65 to 74	7	25	0	0	0	2	0	0	7	27	34
75 to 84	16	45	0	0	0	0	0	0	16	45	61
85+	33	80	0	0	0	0	0	0	33	80	113
TOTALS	62	159	0	0	18	14	0	0	80	173	253

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LEVEL	.DEI(10 B	Y PAYMENT	Other		Private	Charit	V	AVERAGE DAILY PAYMENT RATES
	Medicare	Medicaid		Insurance		Care	,	
Nursing Care	26	115	0	3	77	0	221	
Skilled Under 22	0	0	0	0	0	0		0 Skilled Under 22 0 0
ICF/DD	U	32	0	0	0	0		32 Intermediate DD 0 109
Sheltered Care		02	0	0	0	0	_	0 Shelter 0 0
TOTALS	26	147	0	3	77	0	253	53
	RESIDEN	ITS BY RAC	IAL/ETHN	IICITY GR	OUPING			STAFFING
RACE		Nursing Care	Skilled Under 22	2 ICF/D	Shelte DD Ca		Totals	EMPLOYMENT FULL-TIME CATEGORY EQUIVALENT
Asian		1	0		0	0	1	Administrators 4.50
American Indian		0	0		0	0	0	Physicians 1.00
Black		1	0		0	0	1	Director of Nursing 3.00
Hawaiian/Pacific I	sl.	0	0		0	0	0	Registered Nurses 29.50
White		219	0	3	2	0	251	LPN's 28.00
Race Unknown		0	0		0	0	0	Certified Aides 130.00
Total		221	0	3	2	0	253	Other Health Staff 44.00 Non-Health Staff 62.00
ETHNICITY		Nursing Care	Skilled Under 22	2 ICF/E	Shelt DD Ca		Totals	Totals 302.00
Hispanic		1	0	()	0	1	-
Non-Hispanic		220	0	3:	2	0	252	
Ethnicity Unknown	า	0	0	(0	0	0	
Total		221	0	3	2	0	253	-
			ı	NET REVE	NUE BY P	AYOR S	OURCE (F	(Fiscal Year Data)
Medicare	N	1edicaid	Other P	ublic Pı	rivate Insur	ance	Private P	Charity Charity Care Pay TOTALS Care Expense as % of

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
25.6%	42.9%	0.1%	5.4%	26.1%	100.0%	Expense*	Total Net Revenue	
4,119,766	6,910,413	9,770	865,133	4,213,404	16,118,486	0	0.0%	

 $^{^{\}star}$ Charity Expense does not include expenses which may be considered a community benefit.

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		•		•						
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 201	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Decidents on 4/4/0045	240
Nursing Care	434	424	342	409	305	129	384	327	Residents on 1/1/2015	318
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	783
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	796
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	305
TOTAL BEDS	434	424	342	409	305	129	384	327	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	10,458	7.5%	57,908	48.5%	0	3,359	42,381	0	114,106	72.0%	73.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,458	7.5%	57,908	48.5%	0	3,359	42,381	0	114,106	72.0%	73.7%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	1	0	0	0	0	0	0	2	1	3
45 to 59	6	12	0	0	0	0	0	0	6	12	18
60 to 64	7	12	0	0	0	0	0	0	7	12	19
65 to 74	19	17	0	0	0	0	0	0	19	17	36
75 to 84	23	51	0	0	0	0	0	0	23	51	74
85+	36	119	0	0	0	0	0	0	36	119	155
TOTALS	93	212	0	0	0	0	0	0	93	212	305

_	INEN 12 B	Y PAYMENT		E AND LEV									
LEVEL			Other		Private	_	arity				GE DAILY PA		_
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	C	are	TOTALS		LEVEL OF C	CARE	SINGLE [OUBLE
Nursing Care	16	146	8	6	129		0	305		Nursing Ca	re	205	185
Skilled Under 22	0	0	0	0	0		0	0		Skilled Und	ler 22	0	0
ICF/DD		0	0	0	0		0	0		Intermediat	e DD	0	0
Sheltered Care			0	0	0		0	0		Shelter		0	0
TOTALS	16	146	8	6	129		0	305					
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GR	DUPING						STAFFING		
		Nursing	Skilled		Shelt					EMPLOYM		FULL-TII	
RACE		Care	Under 2	2 ICF/D	D Ca	are	To	otals		CATEGO	PRY	EQUIVAL	ENT
Asian		1	0	()	0		1	_	Administrator	S	(5.00
American Indian		0	0	()	0		0		Physicians		(0.00
Black		7	0	()	0		7		Director of Nu	ırsing	6.00	
Hawaiian/Pacific I	sl.	0	0	()	0		0		Registered No	urses	39	9.00
White		297	0	()	0		297		LPN's		42.00	
Race Unknown		0	0	()	0		0		Certified Aide		123.00	
Total		305	0	()	0		305		Other Health		37.00	
									_	Non-Health S	taff	96	5.00
		Nursing	Skilled		Shelt	tered				Totals		349	9.00
ETHNICITY		Care	Under 2	2 ICF/D	D Ca	are	T	otals					
Hispanic		2	0	()	0		2					
Non-Hispanic		285	0	()	0		285					
Ethnicity Unknowr	า	18	0	()	0		18					
Total		305	0	()	0		305					
				NET REVE	NUE BY F	PAYO	R SOL	JRCE (Fisc	al Year Da	ıta)			
											Charity	Charity	Care
Medicare	N	Medicaid	Other F	Public Pr	vate Insur	rance	F	Private Pay		TOTALS	Care	Expense a	
22.3%		36.5%		0.0%	;	3.7%		37.5%	D	100.0%	Expense*	Total Net I	Revenue
5,149,029		8,440,686		0	847	,911		8,675,629		23,113,255	13,220	0.	1%

351

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	0	RESIDENTS BY PRIMARY DIAGNOSIS		
		Aggressive/Anti-Social	3	DIAGNOSIS	_	
TOTAL FACILITIES	6	Chronic Alcoholism	2	Neoplasms	0	
HOSPITAL BASED UNITS	0	Developmentally Disabled	3	Endocrine/Metabolic	0	
FREE STANDING FACILITIES	6	Drug Addiction	3	Blood Disorders	0	
		Medicaid Recipient	0	Nervous System Non Alzheimer	0	
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0	
NURSING CARE BEDS ONLY	6	Mental Illness	3	Mental Illness	0	
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0	
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0	
		Public Aid Recipient	2	Respiratory System	0	
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0	
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0	
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	6	Skin Disorders	0	
NON-PROFIT OWNERSHIP	3	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0	
FOR PROFIT OWNERSHIP	3	Other Restrictions	2	Injuries and Poisonings	0	
		No Restrictions	0	Other Medical Conditions	0	
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0	
LIFE CARE FACILITY	0			TOTALS	0	
				*Data Not Collected for 2015		
Reported Identified Offenders	5	Total Residents	Diagnose	d with Mental Illness	106	

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

PEAK

BEDS

PEAK

BEDS

LICENSED

AKE/IVIEDIO	SAID CERTIFIE	ט פבט			
BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	
IN USE	BEDS	CERTIFIED	CERTIFIED	Danislanta an 4/4/0045	004
352	134	283	383	Residents on 1/1/2015	361
	.01	200		Total Admissions 2015	451
0	0		0	Total Discharges 2015	461
0	0		0	Total Discharges 2013	401

Residents on 12/31/2015

LEVEL OF CARE SET-UP USED SET-UP **BEDS** 470 **Nursing Care** 486 475 382 Skilled Under 22 0 0 0 0 Intermediate DD 0 0 0 0 0 0 0 **Sheltered Care** 0 0 0 0 0 0 **TOTAL BEDS** 486 475 382 470 352 134 283 383

BEDS

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medi Pat. days	care Occ. Pct.	Medio Pat. days		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	12,859	12.4%	57,034	40.8%	2,207	82	49,302	31	121,515	68.5%	70.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	12,859	12.4%	57,034	40.8%	2,207	82	49,302	31	121,515	68.5%	70.1%

RESIDENTS BY AGE GROUP. SEX AND LEVEL OF CARE - DECEMBER 31. 2019	RESIDENTS BY AGE GRO	UP. SEX AND LEVEL	OF CARE - D	ECEMBER 31, 2015
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	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	3	2	0	0	0	0	0	0	3	2	5
45 to 59	11	6	0	0	0	0	0	0	11	6	17
60 to 64	6	12	0	0	0	0	0	0	6	12	18
65 to 74	19	39	0	0	0	0	0	0	19	39	58
75 to 84	26	71	0	0	0	0	0	0	26	71	97
85+	37	120	0	0	0	0	0	0	37	120	157
TOTALS	102	250	0	0	0	0	0	0	102	250	352

31.0%

7,792,494

1.7%

416,871

*Charity Expense does not include expenses which may be considered a community benefit.

23.6%

5,929,525

_	IDEN 12 B	Y PAYMENT		AND LEVE							
LEVEL			Other		Private	Charity		AVERAGE DAILY			
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE	
Nursing Care	35	143	8	5	160	1	352	Nursing Care	192	178	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0	
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0	
Sheltered Care			0	0	0	0	0	Shelter	0	0	
TOTALS	35	143	8	5	160	1	352				
	RESIDE	NTS BY RAC	IAL/ETHN	ICITY GRO	UPING			STAFFI	NG		
		Nursing	Skilled		Shelte			EMPLOYMENT	FULL-		
RACE		Care	Under 22	ICF/DD	Car	е	Totals	CATEGORY	EQUIV	ALENT	
Asian		0	0	0		0	0	Administrators		6.00	
American Indian		1	0	0		0	1	Physicians		1.00	
Black		4	0	0		0	4	Director of Nursing		6.00	
Hawaiian/Pacific I	sl.	0	0	0		0	0	Registered Nurses	35.7		
White		346	0	0		0	346	LPN's		43.80	
Race Unknown		1	0	0		0	1	Certified Aides	124.60		
Total		352	0	0		0	352	Other Health Staff		45.00	
								Non-Health Staff		94.90	
		Nursing	Skilled		Shelte	red		Totals	;	357.05	
ETHNICITY		Care	Under 22	ICF/DD			Totals				
Hispanic		1	0	0		0	1				
Non-Hispanic		351	0	0		0	351				
Ethnicity Unknown	า	0	0	0		0	0				
Total		352	0	0		0	352				
			N	IET REVEN	UE BY PA	AYOR SO	OURCE (Fiscal	Year Data)			
								Charity	Char	ity Care	
Medicare	N	Medicaid	Other Pu	ıblic Priv	ate Insura	nce	Private Pay	TOTALS Care	Expense	e as % of	

1.2%

292,693

42.7%

10,743,568

100.0%

25,175,151

Expense*

6,193

Total Net Revenue

0.0%

TOTALS

Total Residents Diagnosed with Mental Illness

*Data Not Collected for 2015

Reported Identified Offenders	3	Total Residents
LICENSED BEDS. E	BEDS IN USE, MEDIC	ARE/MEDICAID CERTIFIED BEDS

1

LIFE CARE FACILITY

		,		•						
		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 201	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D : 1	4.40
Nursing Care	477	477	414	477	350	127	215	497	Residents on 1/1/2015	449
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	605
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	621
Sheltered Care	32	92	85	22	83	-51			Residents on 12/31/2015	433
TOTAL BEDS	509	569	499	499	433	76	215	497	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	15,401	19.6%	61,140	33.7%	428	239	56,473	82	133,763	76.8%	76.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	27,257	179	27,436	234.9%	81.7%
TOTALS	15,401	19.6%	61,140	33.7%	428	239	83,730	261	161,199	86.8%	77.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	4	4	0	0	0	0	1	2	5	6	11
60 to 64	6	7	0	0	0	0	1	0	7	7	14
65 to 74	13	21	0	0	0	0	2	2	15	23	38
75 to 84	47	59	0	0	0	0	7	14	54	73	127
85+	51	138	0	0	0	0	8	46	59	184	243
TOTALS	121	229	0	0	0	0	19	64	140	293	433

0

42

LEVEL			Other		Private	Charity	V		AVERA	GE DAILY PA	YMENT RA	TES
	Medicare	Medicaid	Public	Insurance	Pay	Care	,	.S	LEVEL OF (-		DOUBLE
Nursing Care	47	139	3	2	159	0	350)	Nursing Ca	ire	217	190
Skilled Under 22	0	0	0	0	0	0	C)	Skilled Und	der 22	0	0
ICF/DD		0	0	0	0	0	C	0	Intermedia	te DD	0	0
Sheltered Care			0	0	83	0	83	3	Shelter		85	63
TOTALS	47	139	3	2	242	0	433	3				
	RESIDE	NTS BY RAC	IAL/ETH	NICITY GRO	UPING					STAFFING		
		Nursing	Skilled		Shelte				EMPLOYM		FULL-TII	
RACE		Care	Under 22	2 ICF/DI	O Car	е	Totals		CATEGO	DRY	EQUIVAL	ENT.
Asian		0	0	C		0	0		Administrator	'S	-	7.00
American Indian		0	0	C		0	0		Physicians		(0.00
Black		0	0	C		0	0		Director of No	ursing	-	7.00
Hawaiian/Pacific I	sl.	0	0	C		0	0		Registered N	urses	4	7.22
White		350	0	C	8	33	433		LPN's		42	2.66
Race Unknown		0	0	C	1	0	0		Certified Aide		178	8.78
Total		350	0	C	8	33	433		Other Health	Staff	10	0.05
									Non-Health S	staff	200	6.41
		Nursing	Skilled		Shelte	ered			Totals		499	9.12
ETHNICITY		Care	Under 2	2 ICF/D	D Car	re	Totals					
Hispanic		0	0	0		0	0					
Non-Hispanic		350	0	0	8	83	433					
Ethnicity Unknown	า	0	0	0		0	0					
Total		350	0	0	8	83	433					
				NET REVE	NUE BY PA	AYOR S	OURCE (F	iscal Year	Data)			
										Charity	Charity	Care
Medicare	N	/ledicaid	Other P	ublic Pri	vate Insura	nce	Private P	Pay	TOTALS	Care	Expense a	s % of
19.9%		27.3%		0.2%	2	.2%	50.	.4%	100.0%	Expense*	Total Net I	Revenue
6,103,093		8,391,668	60	,841	667,9	916	15,499,4	449	30,722,967	67,739	0.	.2%

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	6	DIAGNOSIS	
TOTAL FACILITIES	11	Chronic Alcoholism	7	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	4	Endocrine/Metabolic	0
FREE STANDING FACILITIES	10	Drug Addiction	7	Blood Disorders	0
		Medicaid Recipient	1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	10	Mental Illness	5	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	10	Skin Disorders	0
NON-PROFIT OWNERSHIP	2	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	8	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	1	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	3			Non-Medical Conditions	0
LIFE CARE FACILITY	2			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	28	Total Residents	Diagnosed	I with Mental Illness	59

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	015
Nursing Care	1,118	1,073	912	1,063	806	312	808	823	Residents on 1/1/2015 Total Admissions 2015	866 2,244
Skilled Under 22	0	0	0	0	0	0		0		,
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	2,311
Sheltered Care	29	3	1	3	0	29			Residents on 12/31/2015	799
TOTAL BEDS	1,147	1,076	913	1,066	806	341	808	823	-	

FACILITY UTILIZATION - 2015

	Medi		Medic		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days (Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	27,126	9.2%	157,016	52.3%	2,507	7,854	106,704	7	301,214	73.8%	76.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	210	0	210	2.0%	19.2%
TOTALS	27,126	9.2%	157,016	52.3%	2,507	7,854	106,914	7	301,424	72.0%	76.7%

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	4	1	0	0	0	0	0	0	4	1	5
45 to 59	19	20	0	0	0	0	0	0	19	20	39
60 to 64	13	10	0	0	0	0	0	0	13	10	23
65 to 74	42	56	0	0	0	0	0	0	42	56	98
75 to 84	71	146	0	0	0	0	0	0	71	146	217
85+	103	336	0	0	0	0	0	0	103	336	439
TOTALS	252	569	0	0	0	0	0	0	252	569	821

13,951,403

15,513,117

145,168

*Charity Expense does not include expenses which may be considered a community benefit.

RES LEVEL	IDENTS B	Y PAYMENT	Other	AND LEVE	L OF CAF Private	RE Charity		AVERAGE DAILY P	AVMENT T	ATEC
OF CARE	Medicare	Medicaid		nsurance	Private	Charle	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	69	409	3	11	314	0	806	Nursing Care	243	231
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD	U	0	0	0	0	0	0	Intermediate DD	0	0
Sheltered Care		U	0	0	0	0	0	Shelter	78	78
TOTALS	69	409	3	11	314	0	806	Sheller	70	70
	RESIDEN	ITS BY RAC	IAL/ETHNI	CITY GROU	JPING			STAFFING		
RACE	0.5	Nursing Care	Skilled Under 22	ICF/DD	Shelte		Totals	EMPLOYMENT CATEGORY	FULL- ⁻ EQUIV <i>F</i>	
										
Asian		3 1	0	0		0	3	Administrators		10.10
American Indian			0	0		0	1	Physicians (Namica)		1.05
Black		32	0	0		0	32	Director of Nursing		10.50
Hawaiian/Pacific I	ISI.	0	0	0		0	0	Registered Nurses		78.80
White		785	0	0		0	785	LPN's		23.90
Race Unknown		0	0	0		0	0	Certified Aides	_	86.20
Total		821	0	0		0	821	Other Health Staff		54.00
								Non-Health Staff	3	01.00
		Nursing	Skilled		Shelte	red		Totals	9	65.55
ETHNICITY		Care	Under 22	ICF/DD	Car	е	Totals			
Hispanic		5	0	0		0	5			
Non-Hispanic		779	0	0		0	779			
Ethnicity Unknow	n	37	0	0		0	37			
Total		821	0	0		0	821			
			N	ET REVEN	JE BY PA	YOR SO	OURCE (Fiscal	Year Data)		
								Charity	Charit	ty Care
Medicare	N	/ledicaid	Other Pu	blic Priva	ate Insura	nce	Private Pay	TOTALS Care	Expense	,
21.5%	•••	23.9%		.2%		9%	45.5%	100.0% Expense*	•	t Revenue

5,764,901

29,490,714

64,865,303

1,800,775

2.8%

ILLINOIS LONG-TERM CARE DATA SU	WIWIAR 1-CA	LENDAR TEAR 2015 LI	C PLANNING ARE	A Macon	
HEALTH SERVICE AREA	004	ADMISSION RESTRICTION	NS	RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	6	DIAGNOSIS	
TOTAL FACILITIES	17	Chronic Alcoholism	7	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	16	Drug Addiction	11	Blood Disorders	0
		Medicaid Recipient	1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	3	Alzheimer Disease	0
NURSING CARE BEDS ONLY	11	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	5	Non-Ambulatory	3	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	4	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	3	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	15	Skin Disorders	0
NON-PROFIT OWNERSHIP	5	Infectious Disease w/ Isolation	5	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	12	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	2	Other Medical Conditions	0

Reported Identified Offenders 57

CONTINUING CARE COMMUNITY

LIFE CARE FACILITY

Total Residents Diagnosed with Mental Illness

Non-Medical Conditions

*Data Not Collected for 2015

TOTALS

425

0

0

LICENSED BEDS, BEI	OS IN USE, M	IEDICARE/MEDICAII	CERTIFIED BEDS
DEAK	DEAK		

2

1

		PEAK	PEAK						ADMISSIONS AN	ID
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 20	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	5 11	
Nursing Care	1,257	1,205	1,089	1,205	956	301	1004	1035	Residents on 1/1/2015	1,085
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	1,910
Intermediate DD	48	48	47	48	45	3		48	Total Discharges 2015	1,990
Sheltered Care	16	16	4	16	4	12			Residents on 12/31/2015	1,005
TOTAL BEDS	1,321	1,269	1,140	1,269	1,005	316	1004	1083	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Med Pat. days	icare Occ. Pct.	Med Pat. days	icaid Occ. Pct.	Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	52,845	14.4%	213,248	56.4%	3,482	7,213	84,185	0	360,973	78.7%	82.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			16,282	92.9%	16	0	0	0	16,298	93.0%	93.0%
Sheltered Care					0	0	1,364	0	1,364	23.4%	23.4%
TOTALS	52,845	14.4%	229,530	58.1%	3,498	7,213	85,549	0	378,635	78.5%	81.7%

RESIDENTS BY AGE GROUP. SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	36	16	0	0	7	4	0	0	43	20	63
45 to 59	54	41	0	0	8	9	0	0	62	50	112
60 to 64	32	32	0	0	3	5	0	0	35	37	72
65 to 74	71	68	0	0	2	5	0	0	73	73	146
75 to 84	59	145	0	0	0	2	0	1	59	148	207
85+	70	332	0	0	0	0	0	3	70	335	405
TOTALS	322	634	0	0	20	25	0	4	342	663	1.005

_	IDENTS B	Y PAYMENT		E AND LEV				AVED 405 5	. DAYMEN:	D.1750
LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS	AVERAGE DAILY LEVEL OF CARE	PAYMENT SINGLE	_
								_		
Nursing Care	117	618	10	9	202	0	956	Nursing Care	197	180
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		45	0	0	0	0	45	Intermediate DD	153	170
Sheltered Care			0	0	4	0	4	Shelter	100	0
TOTALS	117	663	10	9	206	0	1,005			
	RESIDE	NTS BY RAC	IAL/ETHN	NICITY GRO	UPING			STAFF	ING	
		Nursing	Skilled		Shelte	red		EMPLOYMENT	FULL	-TIME
RACE		Care	Under 22	2 ICF/DI	O Car	е	Totals	CATEGORY	EQUIV	'ALENT
Asian		0	0	0		0	0	Administrators		13.75
American Indian		0	0	0		0	0	Physicians		4.00
Black		127	0	3		0	130	Director of Nursing		16.00
Hawaiian/Pacific I	sl.	1	0	0		0	1	Registered Nurses		57.75
White		824	0	42		4	870	LPN's		126.75
Race Unknown		4	0	0		0	4	Certified Aides		429.50
Total		956	0	45		4	1,005	Other Health Staff		91.20
								Non-Health Staff		344.75
		Nursing	Skilled		Shelte	ered		Totals	1	083.70
ETHNICITY		Care	Under 22	2 ICF/DI	D Ca	re	Totals			
Hispanic		2	0	0		0	2			
Non-Hispanic		951	0	45		4	1,000			
Ethnicity Unknow	n	3	0	0		0	3			
Total		956	0	45		4	1,005			
				NET REVE	NUE BY P	AYOR S	OURCE (Fiscal	Year Data)		
								Charity	y Char	ity Care
Medicare	N	Medicaid	Other P	ublic Pri	vate Insura	ance	Private Pay	TOTALS Care	Expens	e as % of
33.0%		40.8%	(0.6%	4	.5%	21.1%	100.0% Expens	se* Total N	et Revenue
25,344,372		31,286,186	437	,124	3,477,4	417	16,153,979	76,699,078	0	0.0%

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
		Aggressive/Anti-Social	0	DIAGNOSIS	
TOTAL FACILITIES	6	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	6	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	3	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	2	Non-Ambulatory	2	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	2	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	1	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	6	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	2	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	5	Other Restrictions	3	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	8	Total Residents	Diagnosed	with Mental Illness	158

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

				_,						
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	15
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	361 0 32 48	355 0 32 48	281 0 28 8	355 0 32 22	247 0 25 8	114 0 7 40	311	361 0 32	 Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015 	287 317 295 309
TOTAL BEDS	441	435	317	409	280	161	311	393	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	13,174	11.6%	52,458	39.8%	586	869	26,063	0	93,150	70.7%	71.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			8,921	76.4%	167	0	0	0	9,088	77.8%	77.8%
Sheltered Care					0	0	1,984	0	1,984	11.3%	11.3%
TOTALS	13,174	11.6%	61,379	42.8%	753	869	28,047	0	104,222	64.7%	65.6%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECE	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	NDER 22	INTER	MED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	2	0	0	7	7	0	0	7	9	16
45 to 59	5	16	0	0	2	3	0	0	7	19	26
60 to 64	3	7	0	0	1	3	2	0	6	10	16
65 to 74	14	25	0	0	0	2	1	0	15	27	42
75 to 84	24	50	0	0	0	0	1	0	25	50	75
85+	17	84	0	0	0	0	2	2	19	86	105

10

15

2

79

201

0

0

TOTALS

63

184

280

5,659,551

8,268,443

0

*Charity Expense does not include expenses which may be considered a community benefit.

LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT	RATES	
OF CARE	Medicare	Medicaid	Public Ir	nsurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE	
Nursing Care	30	131	16	2	68	0	247	Nursing Care	167	151	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0	
ICF/DD		25	0	0	0	0	25	Intermediate DD	121	124	
Sheltered Care			0	0	8	0	8	Shelter	37	0	
TOTALS	30	156	16	2	76	0	280				
	RESIDE	NTS BY RAC	IAL/ETHNI	CITY GROU	JPING			STAFFI	NG		
		Nursing	Skilled		Sheltere	ed		EMPLOYMENT	FULL-		
RACE		Care	Under 22	ICF/DD	Care	•	Γotals	CATEGORY	EQUIV	ALENT	
Asian		0	0	0	C)	0	Administrators		4.50	
American Indian		0	0	0	C)	0	Physicians		0.00	
Black		5	0	0	C)	5	Director of Nursing		4.00	
Hawaiian/Pacific I	sl.	0	0	0	C)	0	Registered Nurses		13.00	
White		242	0	25	8	3	275	LPN's		41.25	
Race Unknown		0	0	0	C)	0	Certified Aides		130.50	
Total		247	0	25	8	3	280	Other Health Staff		3.00	
								Non-Health Staff		130.25	
		Nursing	Skilled		Shelter	ed		Totals	;	326.50	
ETHNICITY		Care	Under 22	ICF/DD	Care		Totals				
Hispanic		0	0	1	()	1				
Non-Hispanic		213	0	24	8	3	245				
Ethnicity Unknown	า	34	0	0	()	34				
Total		247	0	25	8	3	280				
			N	ET REVEN	JE BY PA	YOR SC	URCE (Fiscal	Year Data)			
								Charity	Char	ity Care	
Medicare	N	/ledicaid	Other Pul	blic Priva	ate Insuran	ice	Private Pay	TOTALS Care		e as % of	
29.5%		43.1%	0.	0%	3.4	! %	23.9%	100.0% Expens	•	et Revenue	

648,354

4,590,410

19,166,758

0

0.0%

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	15
Nursing Care	160	160	125	160	116	44	160	160	Residents on 1/1/2015	114
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	90
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	88
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	116
TOTAL BEDS	160	160	125	160	116	44	160	160	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Med	icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	2,617	4.5%	20,405	34.9%	0	11	18,185	0	41,218	70.6%	70.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	2,617	4.5%	20,405	34.9%	0	11	18,185	0	41,218	70.6%	70.6%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	0	0	0	0	1	0	1
45 to 59	5	3	0	0	0	0	0	0	5	3	8
60 to 64	2	2	0	0	0	0	0	0	2	2	4
65 to 74	2	6	0	0	0	0	0	0	2	6	8
75 to 84	12	24	0	0	0	0	0	0	12	24	36
85+	10	49	0	0	0	0	0	0	10	49	59
TOTALS	32	84	0	0	0	0	0	0	32	84	116

LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT I	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	7	58	0	1	50	0	116	Nursing Care	192	168
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	7	58	0	1	50	0	116			
	RESIDEN	TS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFF	ING	
RACE		Nursing Care	Skilled Under 2	2 ICF/DD	Shelte Car		Γotals	EMPLOYMENT CATEGORY	FULL- EQUIV	
Asian		0	0	0		0	0	Administrators		2.00
American Indian		0	0	0		0	0	Physicians		0.00
Black		1	0	0		0	1	Director of Nursing		2.00
Hawaiian/Pacific Is	sl.	0	0	0		0	0	Registered Nurses		10.00
White		80	0	0		0	80	LPN's		16.00
Race Unknown		35	0	0		0	35	Certified Aides		72.00
Total		116	0	0		0	116	Other Health Staff		8.00
								Non-Health Staff		65.00
ETHNICITY		Nursing Care	Skilled Under 2	2 ICF/DE	Shelte Ca		Totals	Totals	•	175.00
Hispanic		0	0	0		0	0			
Non-Hispanic		116	0	0		0	116			
Ethnicity Unknown	1	0	0	0		0	0			
Total		116	0	0		0	116			

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
15.8%	40.5%	0.0%	1.5%	42.2%	100.0%	Expense*	Total Net Revenue	
1,231,747	3,169,766	0	117,828	3,299,335	7,818,676	0	0.0%	

 $^{^{\}star}$ Charity Expense does not include expenses which may be considered a community benefit.

LICENSED BEDS, BEDS IN U	SE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care Skilled Under 22 Intermediate DD	259 0	259 0	164 0	259 0	139 0	120 0	121	249 0	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015	151 220 232
Sheltered Care TOTAL BEDS	0 259	259	0 164	259	139	0 120	121	249	Residents on 12/31/2015	139

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

		icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	7,442	16.9%	28,846	31.7%	31	158	16,263	0	52,740	55.8%	55.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	7,442	16.9%	28,846	31.7%	31	158	16,263	0	52,740	55.8%	55.8%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	_TERED	T	TOTAL	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	4	1	0	0	0	0	0	0	4	1	5
60 to 64	0	6	0	0	0	0	0	0	0	6	6
65 to 74	6	10	0	0	0	0	0	0	6	10	16
75 to 84	9	33	0	0	0	0	0	0	9	33	42
85+	14	56	0	0	0	0	0	0	14	56	70
TOTALS	33	106	0	0	0	0	0	0	33	106	139

LEVEL			Other		Private	Charit	V		AVERA	GE DAILY PA	YMENT RA	ATES
OF CARE	Medicare	Medicaid		Insurance	Pay	Care	,	ALS	LEVEL OF C			DOUBLE
Nursing Care	18	83	1	0	37	0	1	39	Nursing Ca	ire	162	154
Skilled Under 22	0	0	0	0	0	0		0	Skilled Und	ler 22	0	0
ICF/DD		0	0	0	0	0		0	Intermediate DD Shelter		0	0
Sheltered Care			0	0	0	0		0			0	0
TOTALS	18	83	1	0	37	0	1	39				
	RESIDE	NTS BY RAC	IAL/ETHN	NICITY GR	OUPING					STAFFING		
RACE		Nursing Care	Skilled Under 22	2 ICF/D	Shelte D Car		Totals		EMPLOYM CATEGO		FULL-TI EQUIVAL	
Asian		0	0	()	0	0	_	Administrator	S		2.00
American Indian		0	0	()	0	0		Physicians			0.00
Black		1	0	()	0	1		Director of Nursing		1.00	
Hawaiian/Pacific I	sl.	0	0	()	0	0		Registered Nurses			7.50
White		138	0	()	0	138		LPN's		1	9.00
Race Unknown		0	0	()	0	0		Certified Aide	s	61.00	
Total		139	0	()	0	139	_	Other Health Non-Health S		3.00 58.00	
										lan		
ETHNICITY		Nursing Care	Skilled Under 22	2 ICF/D	Shelte D Ca		Totals		Totals		15	1.50
Hispanic		0	0	()	0	0	_				
Non-Hispanic		139	0	()	0	139					
Ethnicity Unknown	1	0	0	()	0	0					
Total		139	0	()	0	139	_				
				NET REVE	NUE BY P	AYOR S	OURCE	(Fiscal Ye	ear Data)	<u> </u>		
										Charity	Charity	Care
Medicare	N	/ledicaid	Other P	ublic Pr	ivate Insura	ance	Private	Pay	TOTALS	Care	Expense a	as % of
33.4%		38.8%	(0.3%	0	.9%	2	26.6%	100.0%	Expense*	Total Net	Revenue
3,465,299		4,019,359	29	,730	91,4	452	2,757	7,180	10,363,020	0	0	.0%

Reported Identified Offenders	15	Total Residents
LICENSED BEDS	, BEDS IN USE, MEDICA	RE/MEDICAID CERTIFIED BEDS

		,		•						
		PEAK	PEAK						ADMISSIONS AN	ID
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 20	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D '- 4 /4 /004 F	507
Nursing Care	759	713	544	713	498	261	602	747	Residents on 1/1/2015	507
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	1,285
Intermediate DD	16	16	15	16	14	2		16	Total Discharges 2015	1,280
Sheltered Care	60	60	51	60	43	17			Residents on 12/31/2015	512
TOTAL BEDS	835	789	610	789	555	280	602	763	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE		icare	Medic		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	37,716	17.2%	106,657	39.1%	2,973	4,158	43,172	0	194,676	70.3%	74.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,294	90.7%	0	0	0	0	5,294	90.7%	90.7%
Sheltered Care					0	0	15,569	0	15,569	71.1%	71.1%
TOTALS	37,716	17.2%	111,951	40.2%	2,973	4,158	58,741	0	215,539	70.7%	74.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSING CARE		SKL UNDER 22		INTER	INTERMED. DD		SHELTERED		TOTAL	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	5	3	0	0	2	3	0	0	7	6	13
45 to 59	28	23	0	0	2	3	0	0	30	26	56
60 to 64	11	15	0	0	1	2	0	0	12	17	29
65 to 74	38	37	0	0	1	0	1	1	40	38	78
75 to 84	56	86	0	0	0	0	2	3	58	89	147
85+	62	134	0	0	0	0	5	31	67	165	232
TOTALS	200	298	0	0	6	8	8	35	214	341	555

119

*Data Not Collected for 2015

Total Residents Diagnosed with Mental Illness

LEVEL			Other		Private	Charity	,	AVERAGE DAILY P.	AYMENT RA	TES	
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE		DOUBLE	
Nursing Care	77	279	8	11	123	0	498	Nursing Care	208	171	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0	
ICF/DD		14	0	0	0	0	14	Intermediate DD	0	113	
Sheltered Care			0	0	43	0	43	Shelter	145	130	
TOTALS	77	293	8	11	166	0	555				
	RESIDE	NTS BY RAC	IAL/ETHN	NICITY GRO	UPING			STAFFING			
		Nursing	Skilled		Shelter			EMPLOYMENT	FULL-TI		
RACE		Care	Under 22	2 ICF/DI	O Care)	Totals	CATEGORY	EQUIVAL	ENT	
Asian		1	0	0	()	1	Administrators		6.25	
American Indian		0	0	0	()	0	Physicians		1.00	
Black		43	0	2	()	45	Director of Nursing		6.00	
Hawaiian/Pacific Is	sl.	0	0	0	()	0	Registered Nurses	7	0.35	
White		453	0	12	43	3	508	LPN's	5	7.70	
Race Unknown		1	0	0	()	1	Certified Aides	257.50 20.00		
Total		498	0	14	43	3	555	Other Health Staff			
								Non-Health Staff	20	4.40	
		Nursing	Skilled		Shelter	ed		Totals	62	3.20	
ETHNICITY		Care	Under 22	2 ICF/DI	D Care)	Totals				
Hispanic		1	0	0	(0	1				
Non-Hispanic		497	0	14	4	3	554				
Ethnicity Unknown	1	0	0	0	(0	0				
Total		498	0	14	4	3	555				
				NET REVE	NUE BY PA	YOR S	OURCE (Fisca	Year Data)			
								Charity	Charity	Care	
Medicare	ı	Medicaid	Other P	ublic Pri	vate Insurar	nce	Private Pay	TOTALS Care	Expense a	as % of	
28.1%		33.1%		1.5%	9.1	1%	28.2%	100.0% Expense*	Total Net	Revenue	
11,115,557		13,093,905	588	,260	3,602,2	16	11,169,551	39,569,489 0	0	.0%	

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNOSIS*			
		Aggressive/Anti-Social	0	DIAGNOSIS			
TOTAL FACILITIES	1	Chronic Alcoholism	0	Neoplasms	0		
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0		
FREE STANDING FACILITIES	1	Drug Addiction	0	Blood Disorders	0		
		Medicaid Recipient	0	Nervous System Non Alzheimer	0		
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0		
NURSING CARE BEDS ONLY	1	Mental Illness	0	Mental Illness	0		
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0		
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0		
		Public Aid Recipient	0	Respiratory System	0		
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0		
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0		
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	1	Skin Disorders	0		
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0		
FOR PROFIT OWNERSHIP	1	Other Restrictions	0	Injuries and Poisonings	0		
		No Restrictions	0	Other Medical Conditions	0		
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0		
LIFE CARE FACILITY	0			TOTALS	0		
				*Data Not Collected for 2015			
Reported Identified Offenders	0	0 Total Residents Diagnosed with Mental Illness					

LICENSED BEDS.	BEDS IN U	ISE. MEDICARE/MEDICAID	CERTIFIED BEDS

	LICENSED	PEAK	PEAK	DEDC	DEDC	AVAII ABI F	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 201	
	LICENSED	BEDS	BEDS	BEDS	BEDS	, , , , , , , , , , , , , , , , , , , ,		,	DISCHARGES - 201	ວ
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D : 1 / 4/4/0045	
Nursing Care	83	83	71	83	71	12	83	83	Residents on 1/1/2015	58
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	172
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	159
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	71
TOTAL BEDS	83	83	71	83	71	12	83	83	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	3,361	11.1%	21,364	70.5%	0	0	934	0	25,659	84.7%	84.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,361	11.1%	21,364	70.5%	0	0	934	0	25,659	84.7%	84.7%

	NURSING CARE		SKL UNDER 22		INTER	INTERMED. DD		SHELTERED		TOTAL	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	0	0	0	0	0	1	1
45 to 59	6	4	0	0	0	0	0	0	6	4	10
60 to 64	1	3	0	0	0	0	0	0	1	3	4
65 to 74	12	2	0	0	0	0	0	0	12	2	14
75 to 84	15	12	0	0	0	0	0	0	15	12	27
85+	2	13	0	0	0	0	0	0	2	13	15
TOTALS	36	35	0	0	0	0	0	0	36	35	71

LEVEL	, –	Y PAYMENT	Other		Private	Charit	v		AVERAGE DAIL)	PAYMENT	RATES	
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	,	ALS	LEVEL OF CARE	SINGLE		
Nursing Care	11	58	0	0	2	0		71	Nursing Care	145	135	
Skilled Under 22	0	0	0	0	0	0		0	Skilled Under 22	0	0	
ICF/DD		0	0	0	0	0		0	Intermediate DD	0	0	
Sheltered Care			0	0	0	0		0	Shelter	0	0	
TOTALS	11	58	0	0	2	0		71				
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GRO	DUPING				STAFF	ING		
		Nursing	Skilled		Shelte				EMPLOYMENT FULL-TIME			
RACE		Care	Under 22	2 ICF/DI	D Cai	e	Totals		CATEGORY	EQUIV	ALENT	
Asian		0	0	C)	0	0	_	Administrators		1.00	
American Indian		0	0	C)	0	0		Physicians		2.00	
Black		24	0	C)	0	24		Director of Nursing	Director of Nursing 1		
Hawaiian/Pacific I	sl.	0	0	C)	0	0		Registered Nurses	Registered Nurses 3		
White		47	0	C)	0	47		LPN's		11.00	
Race Unknown		0	0	C)	0	0		Certified Aides		31.00	
Total		71	0	C)	0	71	Other Health Staff			9.00	
									Non-Health Staff		30.00	
		Nursing	Skilled		Shelte	ered			Totals		88.00	
ETHNICITY		Care	Under 2	2 ICF/D	D Ca	re	Totals					
Hispanic		0	0	0		0	0	_				
Non-Hispanic		71	0	0		0	71					
Ethnicity Unknown	า	0	0	0		0	0					
Total		71	0	0		0	71	_				
				NET REVE	NUE BY P	AYOR S	OURCE	(Fiscal Ye	ear Data)			
									Charity	/ Chai	ity Care	
Medicare	ľ	Medicaid	Other F	ublic Pri	vate Insura	ance	Private	e Pay	TOTALS Care	Expens	e as % of	
33.3%		62.9%		0.0%	0	.0%		3.8%	100.0% Expens	se* Total N	et Revenue	
1,442,142		2,724,097		0		0	16	6,282	4,332,521	0	0.0%	

Reported	Identified	Offenders
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0	
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Total Residents Diagnosed with Mental Illness

*Data Not Collected for 2015

	LICENSED	BEDS, BEI	DS IN US	E, MEDICA	ARE/MEDI	CAID CERTIFIE	ED BEDS			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents on 4/4/0045	00
Nursing Care	90	84	84	84	76	14	34	90	Residents on 1/1/2015 Total Admissions 2015	93 82
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	o∠ 84
Intermediate DD	16	16	16	16	15	1		16	Residents on 12/31/2015	91
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	91
TOTAL BEDS	106	100	100	100	91	15	34	106		

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Med	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	3,233	26.1%	14,304	43.5%	203	497	8,624	0	26,861	81.8%	87.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,297	90.7%	0	0	365	0	5,662	97.0%	97.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,233	26.1%	19,601	50.7%	203	497	8,989	0	32,523	84.1%	89.1%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	_TERED ´	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	3	2	0	0	3	2	5
45 to 59	1	1	0	0	5	3	0	0	6	4	10
60 to 64	0	4	0	0	1	1	0	0	1	5	6
65 to 74	0	3	0	0	0	0	0	0	0	3	3
75 to 84	3	18	0	0	0	0	0	0	3	18	21
85+	22	24	0	0	0	0	0	0	22	24	46
TOTALS	26	50	0	0	9	6	0	0	35	56	91

_	INEN 12 R	Y PAYMENT		E AND LE										
LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Chari Care	-	AI C		AVERAG LEVEL OF C	SE DAILY PA		ATES DOUBLE	
Nursing Care	9	41	0	2	24	C		76		Nursing Car		161	131	
Skilled Under 22	0	0	0	0	0	C		0		Skilled Und		0	0	
ICF/DD		14	0	0	1	C		15		Intermediate	e DD	139	118	
Sheltered Care			0	0	0	C)	0		Shelter		0	0	
TOTALS	9	55	0	2	25	C)	91						
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GR	OUPING						STAFFING			
		Nursing	Skilled		Shelt					EMPLOYM		FULL-TI		
RACE		Care	Under 22	2 ICF/D	D Ca	are	Totals			CATEGO	RY	EQUIVAL	ENT	
Asian		0	0		0	0	0	=		Administrators	S		1.25	
American Indian		0	0		0	0	0			Physicians			0.00	
Black		4	0		0	0	4			Director of Nu	rsing		1.00	
Hawaiian/Pacific I	sl.	0	0		0	0	0			Registered Nu	ırses		6.25	
White		72	0	1:	5	0	87			LPN's			3.00	
Race Unknown		0	0		0	0	0			Certified Aides	-	32.00		
Total		76	0	1:	5	0	91	_		Other Health S			2.00	
									_	Non-Health St	taff	1	4.00	
		Nursing	Skilled		Shelt	ered				Totals		5	9.50	
ETHNICITY		Care	Under 22	2 ICF/E	DD Ca	are	Totals							
Hispanic		0	0	()	0	0	_						
Non-Hispanic		76	0	15	5	0	91							
Ethnicity Unknown	n	0	0	()	0	0							
Total		76	0	15	5	0	91	_						
			ı	NET REVE	NUE BY F	AYOR	SOURCE	(Fiscal Y	ear Dat	ta)				
											Charity	Charity	Care	
Medicare	N	Medicaid	Other P	ublic Pr	ivate Insur	ance	Private	Pay	-	TOTALS	Care	Expense a	as % of	
31.0%		39.1%	(0.8%		4.3%	2	24.8%		100.0%	Expense*	Total Net	Revenue	
1,685,000		2,127,008	43	,197	233	,000	1,350	0,863		5,439,068	0	0	.0%	

FACILITIES REPORTED BY OWNERSHIP TYPE

DD CARE BEDS ONLY

GOVERNMENTAL OWNERSHIP NON-PROFIT OWNERSHIP FOR PROFIT OWNERSHIP

NURSING CARE BEDS ONLY

MULTI-LICENSED FACILITIES

LIFE CARE FACILITY

Reported Identified Offenders

CONTINUING CARE COMMUNITY

3

2

1

0

0

0

3

0

0

Mental Illness

Non-Mobile

Non-Ambulatory

Public Aid Recipient

Under 65 Years Old

Ventilator Dependent

Other Restrictions

No Restrictions

Unable to Self-Medicate

Infectious Disease w/ Isolation

*Data Not Collected for 2015

0

0

0

0

0

0

3

3

Mental Illness

Developmental Disability

Genitourinary System Disorders

Musculo-skeletal Disorders

Injuries and Poisonings

Other Medical Conditions

Non-Medical Conditions

Circulatory System

Respiratory System

Digestive System

Skin Disorders

TOTALS

Total Residents Diagnosed with Mental Illness

ADMISSIONS AND DISCHARGES - 2015

Residents on 1/1/2015

Total Admissions 2015

Total Discharges 2015

Residents on 12/31/2015

O

0

0

O

O

0

0

0

O

0

0

0

18

130

159

183

106

		PEAK	PEAK						
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	
Nursing Care	206	206	157	206	98	108	88	209	
Skilled Under 22	0	0	0	0	0	0		0	
Intermediate DD	16	16	9	16	8	8		16	
Sheltered Care	0	0	0	0	0	0			
TOTAL BEDS	222	222	166	222	106	116	88	225	

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Med	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	5,998	18.7%	25,437	33.3%	369	637	6,177	0	38,618	51.4%	51.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			3,214	55.0%	0	0	0	0	3,214	55.0%	55.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	5,998	18.7%	28,651	34.9%	369	637	6,177	0	41,832	51.6%	51.6%

RESIDENTS BY AGE GROUP. SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	4	0	0	0	1	0	0	0	5	5
45 to 59	2	2	0	0	1	4	0	0	3	6	9
60 to 64	5	0	0	0	0	0	0	0	5	0	5
65 to 74	7	5	0	0	2	0	0	0	9	5	14
75 to 84	12	14	0	0	0	0	0	0	12	14	26
85+	14	33	0	0	0	0	0	0	14	33	47
TOTALS	40	58	0	0	3	5	0	0	43	63	106

LEVEL			Other		Priv	ate (Charity	,		AVERAC	GE DAILY PA	AYMENT F	RATES
	Medicare	Medicaid	Public	Insurance		ay	Care	TOT	ALS	LEVEL OF C		SINGLE	DOUBLE
Nursing Care	12	65	1	1	1	19	0		98	Nursing Ca	re	144	126
Skilled Under 22	0	0	0	0		0	0		0	Skilled Und	ler 22	0	0
ICF/DD		8	0	0		0	0		8	Intermediat	e DD	0	97
Sheltered Care			0	0		0	0		0	Shelter		0	0
TOTALS	12	73	1	1	1	19	0		106				
	RESIDE	NTS BY RAC	IAL/ETH	NICITY GF	OUPIN	IG					STAFFING	i	
RACE		Nursing Care	Skilled Under 2	2 ICF/[_	Sheltere Care	-	Totals		EMPLOYM CATEGO		FULL- EQUIV	
Asian		0	0		0	0		0	_	Administrator	S		3.00
American Indian		0	0		0	0		0		Physicians			0.00
Black		1	0		0	0		1		Director of Nu	ırsing		2.00
Hawaiian/Pacific Is	sl.	0	0		0	0		0		Registered No	urses		9.00
White		97	0		8	0		105		LPN's			12.00
Race Unknown		0	0		0	0		0		Certified Aides		49.00	
Total		98	0)	8	0		106	_	Other Health			2.00
										Non-Health S	taff		40.00
		Nursing	Skilled		_	Sheltere				Totals		1	117.00
ETHNICITY		Care	Under 2	2 ICF/I	DD	Care		Totals					
Hispanic		0	0)	0	0		0					
Non-Hispanic		98	0)	8	0		106					
Ethnicity Unknown	1	0	0)	0	0		0					
Total		98	0)	8	0		106					
				NET REV	ENUE E	BY PAY	OR S	OURCE	(Fiscal Ye	ear Data)			
											Charity	Chari	ty Care
Medicare	ľ	Medicaid	Other F	Public P	rivate Ir	nsurano	ce	Privat	e Pay	TOTALS	Care	Expense	e as % of
38.2%		49.1%		0.0%		2.69	%		10.1%	100.0%	Expense*	Total Ne	et Revenue
2,919,286		3,750,254		0		197,52	4	77	4,040	7,641,104	0		0.0%

Musculo-skeletal Disorders

Injuries and Poisonings

Other Medical Conditions

*Data Not Collected for 2015

Non-Medical Conditions

TOTALS

0

0

0

0

0

0

Reported Identified Offenders 0 Total Residents Diagnosed with Mental Illness 0

Infectious Disease w/ Isolation

Other Restrictions

No Restrictions

2

0

0

NON-PROFIT OWNERSHIP

FOR PROFIT OWNERSHIP

CONTINUING CARE COMMUNITY

LIFE CARE FACILITY

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	15
Nursing Care	166	160	147	154	128	38	83	123	Residents on 1/1/2015	13
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	18
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	190
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	128
TOTAL BEDS	166	160	147	154	128	38	83	123	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi		Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	5,964	19.7%	23,983	53.4%	0	419	18,574	0	48,940	80.8%	83.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	5,964	19.7%	23,983	53.4%	0	419	18,574	0	48,940	80.8%	83.8%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	0	1	0	0	0	0	0	0	0	1	1
60 to 64	1	0	0	0	0	0	0	0	1	0	1
65 to 74	3	3	0	0	0	0	0	0	3	3	6
75 to 84	10	32	0	0	0	0	0	0	10	32	42
85+	16	62	0	0	0	0	0	0	16	62	78
TOTALS	30	98	0	0	0	0	0	0	30	98	128

LEVEL			Other		Private	Charity		AVERAGE DAIL	Y PAYMENT I	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTAL	S LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	16	57	0	1	54	0	128	8 Nursing Care	165	151
Skilled Under 22	0	0	0	0	0	0	(Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	(0 Intermediate DD	0	0
Sheltered Care			0	0	0	0	(0 Shelter	0	0
TOTALS	16	57	0	1	54	0	128	8		
	RESIDEN	TS BY RAC	IAL/ETH	NICITY GRO	UPING			STAF	FING	
RACE		Nursing Care	Skilled Under 2	2 ICF/DE	Shelte Car		Γotals	EMPLOYMENT CATEGORY	FULL- EQUIV	
Asian		1	0	0		0	1	Administrators		3.00
American Indian		0	0	0		0	0	Physicians		0.00
Black		0	0	0		0	0	Director of Nursing		3.00
Hawaiian/Pacific Is	sl.	0	0	0		0	0	Registered Nurses		14.60
White		127	0	0		0	127	LPN's		8.90
Race Unknown		0	0	0		0	0	Certified Aides		63.00
Total		128	C	0		0	128	Other Health Staff		13.00
								Non-Health Staff		46.90
		Nursing	Skilled		Shelte	ered		Totals	•	152.40
ETHNICITY		Care	Under 2	2 ICF/DE) Ca	re -	Totals			
Hispanic		0	C	0		0	0			
Non-Hispanic		78	C	0		0	78			
Ethnicity Unknown	ı	50	C	0		0	50			
Total		128	C	0		0	128			

						Charity	Charity Care	
Medicare	Medicaid Oth	ther Public I	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
37.0%	% 30.2%	0.0%	1.5%	31.4%	100.0%	Expense*	Total Net Revenue	
3,374,147	7 2,751,318	0	137,316	2,861,069	9,123,850	0	0.0%	
3,374,147	7 2,751,318	0	137,316	2,861,069	9,123,850	0	0.0)%

^{*}Charity Expense does not include expenses which may be considered a community benefit.

	2.02.1022	,		_,		0,42 02.11.11.12	2 2220			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	j
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Danisla da a 4/4/0045	444
Nursing Care	129	126	117	126	105	24	90	114	Residents on 1/1/2015 Total Admissions 2015	111 144
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	150
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2015	105
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2013	103

24

90

114

FACILITY UTILIZATION - 2015 BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

105

TOTAL BEDS

129

126

117

126

	Med	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	4,415	13.4%	19,782	47.5%	0	371	13,840	287	38,695	82.2%	84.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,415	13.4%	19,782	47.5%	0	371	13,840	287	38,695	82.2%	84.1%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	0	0	0	0	0	0	0	0	0	0	0
60 to 64	2	1	0	0	0	0	0	0	2	1	3
65 to 74	3	1	0	0	0	0	0	0	3	1	4
75 to 84	10	26	0	0	0	0	0	0	10	26	36
85+	21	41	0	0	0	0	0	0	21	41	62
TOTALS	36	69	0	0	0	0	0	0	36	69	105

LEVEL	, -	SY PAYMENT	Other		Private	Charity	,	AVERAGE DAILY PAYMENT RATES
OF CARE	Medicare	Medicaid		Insurance	Pay	Care	TOTALS	
Nursing Care	6	62	0	1	36	0	105	Nursing Care 158 135
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22 0 0
ICF/DD		0	0	0	0	0	0	Intermediate DD 0 0
Sheltered Care			0	0	0	0	0	Shelter 0 0
TOTALS	6	62	0	1	36	0	105	5
	RESIDEI	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING			STAFFING
		Nursing	Skilled		Shelter			EMPLOYMENT FULL-TIME
RACE		Care	Under 22	ICF/DE) Care	:	Totals	CATEGORY EQUIVALENT
Asian		0	0	0	()	0	Administrators 2.00
American Indian		2	0	0	()	2	Physicians 0.00
Black		0	0	0	()	0	Director of Nursing 2.00
Hawaiian/Pacific I	sl.	0	0	0	()	0	Registered Nurses 13.00
White		103	0	0	()	103	LPN's 8.00
Race Unknown		0	0	0	()	0	Certified Aides 43.00
Total		105	0	0	()	105	Other Health Staff 5.00
								Non-Health Staff 35.00
		Nursing	Skilled		Shelter	ed		Totals 108.00
ETHNICITY		Care	Under 22	ICF/DI) Care)	Totals	
Hispanic		0	0	0	(0	0	
Non-Hispanic		104	0	0	(0	104	
Ethnicity Unknow	า	1	0	0	(0	1	
Total		105	0	0	(0	105	
			ı	NET REVEN	NUE BY PA	YOR S	OURCE (Fi	iscal Year Data)
								Charity Charity Care
Medicare	ľ	Medicaid	Other P	ublic Priv	vate Insurar	ice	Private Pa	ay TOTALS Care Expense as % of
37.2%		27.2%	2	2.8%	0.6	6%	32.3	.3% 100.0% Expense* Total Net Revenue
2,492,890		1,822,324	187,	581	41,02	24	2,164,87	370 6,708,689 4,369,397 65.1%

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
HEALTH SERVICE AREA	005	Aggressive/Anti-Social	6	DIAGNOSIS	Joio
TOTAL FACILITIES	7	Chronic Alcoholism	4	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	7	Drug Addiction	5	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	2	Alzheimer Disease	0
NURSING CARE BEDS ONLY	4	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	3	Non-Ambulatory	1	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	1	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	7	Skin Disorders	0
NON-PROFIT OWNERSHIP	4	Infectious Disease w/ Isolation	3	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	3	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	2	Total Residents	Diagnosed	with Mental Illness	47

	LICENSED	BEDS, BE	DS IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	D BEDS			
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
	BEDS	3E1-0F	USED	3E1-0F	IN USE	DEDO	CEKTIFIED		Residents on 1/1/2015	365
Nursing Care	434	393	332	393	301	133	386	417	Total Admissions 2015	895
Skilled Under 22	0	0	0	0	0	0		0		
Intermediate DD	48	48	48	48	46	2		48	Total Discharges 2015	913
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	347
TOTAL BEDS	482	441	380	441	347	135	386	465	_	

	Med		Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	23,461	16.7%	50,583	33.2%	0	2,319	34,218	228	110,809	70.0%	77.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			15,257	87.1%	0	0	496	0	15,753	89.9%	89.9%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	23,461	16.7%	65,840	38.8%	0	2,319	34,714	228	126,562	71.9%	78.6%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	4	0	0	11	8	0	0	12	12	24
45 to 59	10	4	0	0	14	6	0	0	24	10	34
60 to 64	8	6	0	0	0	4	0	0	8	10	18
65 to 74	13	22	0	0	1	1	0	0	14	23	37
75 to 84	26	59	0	0	0	1	0	0	26	60	86
85+	25	123	0	0	0	0	0	0	25	123	148
TOTALS	83	218	0	0	26	20	0	0	109	238	347

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS	AVERAG LEVEL OF (GE DAILY F Care	PAYMENT R SINGLE	ATES DOUBLE
Nursing Care	61	133	0	9	97	1	301	Nursing Ca	re	180	141
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	ler 22	0	0
ICF/DD		44	0	0	2	0	46	Intermedia	e DD	123	108
Sheltered Care			0	0	0	0	0	Shelter		0	0
TOTALS	61	177	0	9	99	1	347				
	RESIDEN	ITS BY RAC	IAL/ETHN	ICITY GRO	UPING				STAFFIN	G	
		Nursing	Skilled		Shelter			EMPLOYM		FULL-1	
RACE		Care	Under 22	ICF/DE) Care	e T	otals	CATEGO	RY	EQUIVA	LENT
Asian		0	0	0	()	0	Administrator	S		7.15
American Indian		0	0	0	()	0	Physicians			0.00
Black		1	0	1)	2	Director of Nu	ırsing		4.00
Hawaiian/Pacific I	sl.	0	0	0)	0	Registered N	urses		33.50
White		300	0	45)	345	LPN's			48.33
Race Unknown		0	0	0	()	0	Certified Aide	S	1	85.00
Total		301	0	46	()	347	Other Health	Staff		24.00
								Non-Health S	taff	1	02.23
		Nursing	Skilled		Shelter	ed		Totals		4	04.21
ETHNICITY		Care	Under 22	ICF/DE			Γotals				
Hispanic		1	0	0		0	1				
Non-Hispanic		300	0	46		0	346				
Ethnicity Unknown	า	0	0	0		0	0				
Total		301	0	46		0	347				
			N	IET REVEN	IUE BY PA	YOR SO	URCE (Fiscal Y	ear Data)			
									Charity		y Care
Medicare	N	1edicaid	Other Pu	ublic Priv	ate Insurar	nce	Private Pay	TOTALS	Care	Expense	as % of

						Charity	Charity Care
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of
43.6%	28.9%	0.0%	4.3%	23.6%	100.3%	Expense*	Total Net Revenue
11,265,175	7,481,087	-90,482	1,105,433	6,095,080	25,856,293	4,780	0.0%

 $^{^{\}star}$ Charity Expense does not include expenses which may be considered a community benefit.

ILLINOIS LONG-TERM CARE DATA SU			C PLANNING ARE	A Fayette	
HEALTH SERVICE AREA	005	ADMISSION RESTRICTION	IS	RESIDENTS BY PRIMARY DIAGN	OSIS*
		Aggressive/Anti-Social	2	DIAGNOSIS	
TOTAL FACILITIES	3	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	2	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	3	Mental Illness	2	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	3	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	0	Total Re	sidents Diagnosed	with Mental Illness	6

	LICENSED	BEDS, BEL)5 IN US	E, MEDICA	KE/MEDI	CAID CERTIFIE	D RED2			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents as 4/4/0045	4.40
Nursing Care	261	261	150	259	138	123	186	236	Residents on 1/1/2015	142 97
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015 Total Discharges 2015	101
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2015	138
Sheltered Care	0	0	0	0	0	0			-	130
TOTAL BEDS	261	261	150	259	138	123	186	236		

	Medi		Medic		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	3,441	5.1%	33,504	38.9%	810	142	12,659	0	50,556	53.1%	53.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,441	5.1%	33,504	38.9%	810	142	12,659	0	50,556	53.1%	53.1%

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	1	0	0	0	0	0	0	1	1	2
45 to 59	2	4	0	0	0	0	0	0	2	4	6
60 to 64	7	4	0	0	0	0	0	0	7	4	11
65 to 74	16	6	0	0	0	0	0	0	16	6	22
75 to 84	12	16	0	0	0	0	0	0	12	16	28
85+	11	58	0	0	0	0	0	0	11	58	69
TOTALS	49	89	0	0	0	0	0	0	49	89	138

LEVEL			Other		Priva	te (Charity			AVFRA	GE DAILY PA	YMENT RA	ATES
OF CARE	Medicare	Medicaid		Insurance			Care	TOTAI	LS	LEVEL OF (DOUBLE
Nursing Care	7	94	1	0	36	;	0	13	38	Nursing Ca	ire	172	158
Skilled Under 22	0	0	0	0	0)	0		0	Skilled Und	ler 22	0	0
ICF/DD		0	0	0	0)	0		0	Intermedia	te DD	0	0
Sheltered Care			0	0	0)	0		0	Shelter		0	0
TOTALS	7	94	1	0	36	;	0	13	88				
	RESIDE	NTS BY RAC	IAL/ETHN	NICITY G	ROUPING	;					STAFFING		
		Nursing	Skilled		_	eltere				EMPLOYM		FULL-TI	
RACE		Care	Under 22	2 ICF/	DD (Care		Totals		CATEGO	DRY	EQUIVAL	LENT
Asian		0	0		0	0		0		Administrator	s		3.00
American Indian		0	0		0	0		0		Physicians			0.00
Black		1	0		0	0		1		Director of Nu	ırsing		3.00
Hawaiian/Pacific I	sl.	0	0		0	0		0		Registered N	urses		6.23
White		137	0		0	0		137		LPN's		2	2.39
Race Unknown		0	0		0	0		0		Certified Aide	·S	5	9.81
Total		138	0		0	0		138		Other Health	Staff	1	7.00
										Non-Health S	taff	2	2.50
		Nursing	Skilled		Sh	eltere	d			Totals		13	3.93
ETHNICITY		Care	Under 22	2 ICF/	DD	Care		Totals					
Hispanic		0	0		0	0		0					
Non-Hispanic		138	0		0	0		138					
Ethnicity Unknown	า	0	0		0	0		0					
Total		138	0		0	0		138					
				NET REV	ENUE BY	/ PAY	OR SC	OURCE (Fiscal Ye	ear Data)			
											Charity	Charity	Care
Medicare	1	Medicaid	Other P	ublic F	rivate Ins	suranc	е	Private I	Pay	TOTALS	Care	Expense a	as % of
17.8%		57.0%	(0.0%		1.79	%	23	3.4%	100.0%	Expense*	Total Net	Revenue
1,637,646		5,232,813		0	15	57,728	3	2,152,	,594	9,180,781	0	0	.0%

ILLINOIS LONG-TERM CARE DA				•	LTC PLANNING	, <u></u>	A Franklin	
HEALTH SERVICE AREA	C	05		N RESTRICTION	ONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
		_	Aggressive/Anti-S			4	DIAGNOSIS	_
TOTAL FACILITIES		6	Chronic Alcoholis			2	Neoplasms	0
HOSPITAL BASED UNITS		0	Developmentally	Disabled		3	Endocrine/Metabolic	0
FREE STANDING FACILITIES		6	Drug Addiction			4	Blood Disorders	0
			Medicaid Recipier	nt		0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:			Medicare Recipie	nt		1	Alzheimer Disease	0
NURSING CARE BEDS ONLY		5	Mental Illness			2	Mental Illness	0
DD CARE BEDS ONLY		1	Non-Ambulatory			0	Developmental Disability	0
MULTI-LICENSED FACILITIES	3	0	Non-Mobile			1	Circulatory System	0
			Public Aid Recipie	ent		0	Respiratory System	0
FACILITIES REPORTED BY			Under 65 Years C	Old		0	Digestive System	0
OWNERSHIP TYPE			Unable to Self-Me	edicate		0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSH	IIP	0	Ventilator Depend	dent		6	Skin Disorders	0
NON-PROFIT OWNERSHIP		0	Infectious Disease	e w/ Isolation		1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP		6	Other Restrictions	S		2	Injuries and Poisonings	0
			No Restrictions			0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	,	0					Non-Medical Conditions	0
LIFE CARE FACILITY		0					TOTALS	0
							*Data Not Collected for 2015	
Reported Identified Offenders		2		Total R	tesidents Diagn	osed	l with Mental Illness	35
LICENSED BE	DS, BEDS IN	ı us	E, MEDICARE/MEDIC	CAID CERTIFIE	D BEDS			
F	PEAK PE	AK					ADMISSIONS AN	D
LICENSED E	EDS BE	DS	BEDS BEDS	AVAILABLE	MEDICARE	MED	DICAID DISCHARGES - 20	15

	LICENSED	BEDS, BEL	S IN US	E, MEDICA	KE/MEDIO	CAID CERTIFIE	D BEDS			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Decidents on 4/4/0045	074
Nursing Care	383	377	274	377	221	162	186	365	Residents on 1/1/2015 Total Admissions 2015	274 373
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	418
Intermediate DD	16	16	13	8	8	8		16	Residents on 12/31/2015	229
Sheltered Care	0	0	0	0	0	0			-	223
TOTAL BEDS	399	393	287	385	229	170	186	381		

LEVEL OF CARE	Medi Pat. davs	icare Occ. Pct.	Medi Pat. days		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	11,308	16.7%	52,921	39.7%	1,034	1,072	21,007	0	87,342	62.5%	63.5%
Skilled Under 22	•		0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			4,249	72.8%	0	0	0	0	4,249	72.8%	72.8%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	11,308	16.7%	57,170	41.1%	1,034	1,072	21,007	0	91,591	62.9%	63.9%

	NURSIN	IG CARE	SKL UNDER 22		INTERMED. DD		SHEI	SHELTERED		TOTAL	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	1	1	0	0	2	1	3
45 to 59	7	8	0	0	3	1	0	0	10	9	19
60 to 64	5	6	0	0	1	0	0	0	6	6	12
65 to 74	18	19	0	0	0	1	0	0	18	20	38
75 to 84	18	44	0	0	0	0	0	0	18	44	62
85+	21	74	0	0	0	0	0	0	21	74	95
TOTALS	70	151	0	0	5	3	0	0	75	154	229

LEVEL			Other		Private	Charity	V		ΔVFR Δ(GE DAILY PA	YMENT RA	ATES
OF CARE	Medicare	Medicaid		Insurance	Pay	Care	,	LS	LEVEL OF C			DOUBLE
Nursing Care	24	140	0	4	53	0	22	<u> </u>	Nursing Ca	re	134	125
Skilled Under 22	0	0	0	0	0	0		0	Skilled Und	ler 22	0	0
ICF/DD		8	0	0	0	0		8	Intermediat	e DD	0	103
Sheltered Care			0	0	0	0		0	Shelter		0	0
TOTALS	24	148	0	4	53	0	22	:9				
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING					STAFFING		
RACE		Nursing Care	Skilled Under 22	ICF/DI	Shelter Care		Totals		EMPLOYM CATEGO		FULL-TI EQUIVAL	
Asian		0	0	0	. (0	0		Administrator	 S		6.00
American Indian		0	0	0		0	0		Physicians			0.00
Black		1	0	1	(0	2		Director of Nu	ırsing		5.00
Hawaiian/Pacific I	sl.	0	0	0	(0	0		Registered N	•	2	2.75
White		219	0	7	•	0	226		LPN's		2	4.00
Race Unknown		1	0	0	(0	1		Certified Aide	S	9	9.25
Total		221	0	8	(0	229		Other Health Non-Health S			6.00 3.00
ETHNICITY		Nursing Care	Skilled Under 22	! ICF/D	Shelter D Care		Totals		Totals		23	6.00
Hispanic		1	0	0		0	1					
Non-Hispanic		220	0	8		0	228					
Ethnicity Unknow	า	0	0	0		0	0					
Total		221	0	8		0	229					
			N	NET REVE	NUE BY PA	YOR S	OURCE (Fiscal Yea	ır Data)			
Medicare	,	Medicaid	Other P	ublic Dri	vate Insurar	nce	Private	Pav	TOTALS	Charity Care	Charity Expense a	
27.7%	·	35.9%		ublic Pii).8%		10e 8%		Pay 9.8%	101ALS 100.0%	Expense*	Total Net	
4,867,401		6,299,358	143,		1,016,9		5,241,		17,569,052	Expense 0		Revenue .0%

LTC	PL/	NNA	ING	AR	EΑ
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HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	4	RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	1	DIAGNOSIS	
TOTAL FACILITIES	7	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	6	Drug Addiction	1	Blood Disorders	0
		Medicaid Recipient	1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	7	Mental Illness	3	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	1	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	1	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	1	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	1	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	5	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	7	Other Restrictions	3	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	9	Total Residents	Diagnosed	l with Mental Illness	59

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	5
Nursing Care	582	578	480	566	431	151	337	594	Residents on 1/1/2015	46
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	45
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	49
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	43
TOTAL BEDS	582	578	480	566	431	151	337	594	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

		icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	14,911	12.1%	110,070	50.8%	553	2,449	35,793	0	163,776	77.1%	77.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	14,911	12.1%	110,070	50.8%	553	2,449	35,793	0	163,776	77.1%	77.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	2	0	0	0	0	0	0	0	2	0	2	
45 to 59	21	14	0	0	0	0	0	0	21	14	35	
60 to 64	9	7	0	0	0	0	0	0	9	7	16	
65 to 74	24	47	0	0	0	0	0	0	24	47	71	
75 to 84	42	94	0	0	0	0	0	0	42	94	136	
85+	36	135	0	0	0	0	0	0	36	135	171	
TOTALS	134	297	0	0	0	0	0	0	134	297	431	

RES	SIDENTS E	BY PAYMENT	SOURCI	E AND LE	VEL (OF CARE	Ē						
LEVEL			Other		Pı	rivate (Charity			AVERAG	E DAILY PA	YMENT RA	TES
OF CARE	Medicare	Medicaid	Public	Insurance	e l	Pay	Care	TOTAL	.S	LEVEL OF C	ARE	SINGLE I	DOUBLE
Nursing Care	30	302	0	41		58	0	431	1	Nursing Car	е	140	127
Skilled Under 22	0	0	0	0		0	0	0)	Skilled Unde	er 22	0	0
ICF/DD		0	0	0		0	0	0)	Intermediate	e DD	0	0
Sheltered Care			0	0		0	0	0)	Shelter		0	0
TOTALS	30	302	0	41		58	0	431	1				
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY G	ROUP	ING					STAFFING		
		Nursing	Skilled			Sheltere				EMPLOYM		FULL-TI	
RACE		Care	Under 22	2 ICF/	DD	Care	T	Totals		CATEGO	RY	EQUIVAL	.ENT
Asian		0	0		0	0		0	_	Administrators	1		7.00
American Indian		0	0		0	0		0		Physicians			1.00
Black		12	0		0	0		12		Director of Nu	rsing	•	7.00
Hawaiian/Pacific	Isl.	0	0		0	0		0		Registered Nu	rses	20	6.25
White		419	0		0	0		419		LPN's		5	2.00
Race Unknown		0	0		0	0		0		Certified Aides	-		7.25
Total		431	0		0	0		431		Other Health S			0.00
									_	Non-Health St	aff	14	1.00
		Nursing	Skilled			Sheltere	ed			Totals		45	1.50
ETHNICITY		Care	Under 22	2 ICF/	DD	Care	٦	Γotals					
Hispanic		0	0		0	0)	0					
Non-Hispanic		431	0		0	0		431					
Ethnicity Unknow	'n	0	0		0	0		0					
Total		431	0		0	0	1	431					
				NET REV	ENUE	BY PAY	OR SO	URCE (F	iscal Year Da	ta)			
											Charity	Charity	Care
Medicare		Medicaid	Other P	ublic F	rivate	Insuranc	ce	Private P	Pay	TOTALS	Care	Expense a	as % of
24.8%		53.6%		6.4%		1.59	%	13.	.7%	100.0%	Expense*	Total Net	Revenue
5,653,663		12,218,622	1,467	,063		346,643	3	3,124,2	248	22,810,239	0	0	.0%

Reported Identified Offenders	3	Total Residents Diagnosed with Mental Illness	5

LICENSED BEDG BEDG IN LICE MEDICARE/MEDICAR CERTIFIED BEDG

*Data Not Collected for 2015

	LICENSED	BEDS, BEL	05 IN U5	E, MEDICA	KE/WEDI	CAID CERTIFIE	D RED2			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents at 4/4/0045	00
Nursing Care	62	62	53	62	49	13	62	62	Residents on 1/1/2015	63 30
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015 Total Discharges 2015	38
Intermediate DD	16	16	10	16	6	10		16	Residents on 12/31/2015	55
Sheltered Care	0	0	0	0	0	0			- Residents on 12/31/2013	55
TOTAL BEDS	78	78	63	78	55	23	62	78		

FACILITY UTILIZATION - 2015 BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	1,644	7.3%	13,054	57.7%	0	0	2,837	0	17,535	77.5%	77.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			2,785	47.7%	0	0	0	0	2,785	47.7%	47.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	1,644	7.3%	15,839	55.6%	0	0	2,837	0	20,320	71.4%	71.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015 **NURSING CARE** SKL UNDER 22 INTERMED. DD SHELTERED TOTAL **GRAND** AGE GROUPS Male **TOTAL** Male Female Female Male Female Male Female Male Female 0 Under 18 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 18 to 44 0 0 0 45 to 59 3 0 0 0 0 2 4 6 1 1 1 0 0 2 60 to 64 0 1 O 1 n n 1 1 65 to 74 5 1 0 0 1 1 0 0 6 2 8 5 15 0 0 0 6 15 21 75 to 84 0 1 n 5 13 0 0 0 0 0 0 5 13 85+ 18 33 n 4 2 20 35 **TOTALS** 16 n n O 55

LEVEL			Other		Priva	ate (Charity	,		AVFRAC	SE DAILY P	AYMENT F	RATES	
OF CARE	Medicare	Medicaid	Public	Insurance			Care	TOT	ALS	LEVEL OF C		SINGLE	DOUBLE	
Nursing Care	4	36	0	0	,	9	0		49	Nursing Ca	re	125	120	
Skilled Under 22	0	0	0	0	(0	0		0	Skilled Und	er 22	0	0	
ICF/DD		6	0	0	(0	0		6	Intermediat	e DD	0	104	
Sheltered Care			0	0	(0	0		0	Shelter		0	0	
TOTALS	4	42	0	0	!	9	0		55					
	RESIDEI	NTS BY RAC	IAL/ETHI	NICITY GR	OUPIN	G					STAFFING	ì		
RACE		Nursing Care	Skilled Under 2	2 ICF/[_	neltere Care		Totals		EMPLOYM CATEGO		FULL- EQUIV		
Asian		0	0		0	0		0	<u> </u>	Administrator	3		2.00	
American Indian		0	0		0	0		0		Physicians		0.00		
Black		0	0		0	0		0		Director of Nursing			1.00	
Hawaiian/Pacific I	sl.	0	0		0	0		0		Registered Nurses			4.00	
White		49	0		6	0		55		LPN's			7.00	
Race Unknown		0	0		0	0		0		Certified Aide	s	19.00		
Total		49	0	l	6	0		55	_	Other Health Non-Health S	****		8.42 17.00	
ETHNICITY		Nursing Care	Skilled Under 2	2 ICF/I	_	heltere Care		Totals		Totals			58.42	
Hispanic		0	0	 	0	0		0	_					
Non-Hispanic		49	0		6	0		55						
Ethnicity Unknown	า	0	0		0	0		0						
Total		49	0	ı	6	0		55	_					
				NET REVI	ENUE B	Y PAY	OR SO	OURCE	(Fiscal Ye	ear Data)				
											Charity	Chari	ty Care	
Medicare	ľ	Medicaid	Other F	Public P	rivate In	suranc	ce	Private	e Pay	TOTALS	Care	Expense	e as % of	
25.5%		59.7%		0.0%		1.39	%		13.5%	100.0%	Expense*	Total Ne	et Revenue	
772,024		1,806,122		184		39,50	7	40	7,273	3,025,110	0		0.0%	

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	4	RESIDENTS BY PRIMARY DIAGNO	OSIS*
	_	Aggressive/Anti-Social	1	DIAGNOSIS	_
TOTAL FACILITIES	2	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	2	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	2	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	4	Total Residents	Diagnosed	l with Mental Illness	77

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	5
Nursing Care	251	228	196	228	175	76	131	131	Residents on 1/1/2015	162
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	393
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	378
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	177
TOTAL BEDS	251	228	196	228	175	76	131	131	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	12,912	27.0%	45,255	94.6%	0	2,080	17,461	0	77,708	84.8%	93.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	12,912	27.0%	45,255	94.6%	0	2,080	17,461	0	77,708	84.8%	93.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	4	5	0	0	0	0	0	0	4	5	9
60 to 64	8	6	0	0	0	0	0	0	8	6	14
65 to 74	14	17	0	0	0	0	0	0	14	17	31
75 to 84	20	20	0	0	0	0	0	0	20	20	40
85+	37	44	0	0	0	0	0	0	37	44	81
TOTAL S	83	92	0	0	0	0	0	0	83	92	175

Medicare

47.1%

5,662,202

Medicaid

27.1%

3,258,306

Other Public

*Charity Expense does not include expenses which may be considered a community benefit.

1.0%

118,743

Private Insurance

2.0%

240,161

				E AND LEVE						
LEVEL	Madiana	Madiaaid	Other		Private	Charity	TOTALC	AVERAGE DAILY		
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	30	94	0	4	47	0	175	Nursing Care	185	175
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	C
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	C
Sheltered Care			0	0	0	0	0	Shelter	0	C
TOTALS	30	94	0	4	47	0	175			
	RESIDEN	ITS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFFI	NG	
		Nursing	Skilled		Shelte	red		EMPLOYMENT	FULL-1	ΓIME
RACE		Care	Under 2	2 ICF/DD	Car	e -	Γotals	CATEGORY	EQUIVA	LENT
Asian		0	0	0		0	0	Administrators		2.00
American Indian		0	0	0		0	0	Physicians		1.00
Black		17	0	0		0	17	Director of Nursing		2.00
Hawaiian/Pacific	Isl.	0	0	0		0	0	Registered Nurses		15.00
White		155	0	0		0	155	LPN's		25.00
Race Unknown		3	0	0		0	3	Certified Aides		95.00
Total		175	C	0		0	175	Other Health Staff		20.00
								Non-Health Staff		80.00
		Nursing	Skilled		Shelte	ered		Totals	2	40.00
ETHNICITY		Care	Under 2	2 ICF/DD) Cai	re ·	Totals			
Hispanic		3	C	0		0	3			
Non-Hispanic		172	C	0		0	172			
Ethnicity Unknow	n	0	C	0		0	0			
Total		175	C	0		0	175			
				NET REVEN						

Private Pay

2,745,404

22.8%

TOTALS

100.0%

12,024,816

Care

Expense*

0

Expense as % of

Total Net Revenue

0.0%

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	0	DIAGNOSIS	
TOTAL FACILITIES	1	Chronic Alcoholism	0	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	1	Drug Addiction	0	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	1	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	1	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	1	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Penorted Identified Offenders	5	Total Residents	Diagnose	l with Mental Illness	7

Reported Identified Offenders

Total Residents Diagnosed with Mental Illness

LICENSED BEDS, BEDS	IN USE, MEDICARE/MEDICAID CERTIFIED BE	DS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	57 0 0	57 0 0	43 0 0	57 0 0	43 0 0	14 0 0	16	57 0 0	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	39 12 8 43
TOTAL BEDS	57	57	43	57	43	14	16	57	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Med		Medic		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days (JCC. PCI.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	297	5.1%	1,032	5.0%	0	0	1,130	0	2,459	11.8%	11.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	297	5.1%	1,032	5.0%	0	0	1,130	0	2,459	11.8%	11.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	0	0	0	0	0	0	0	0	0	0	0
60 to 64	0	0	0	0	0	0	0	0	0	0	0
65 to 74	4	3	0	0	0	0	0	0	4	3	7
75 to 84	4	10	0	0	0	0	0	0	4	10	14
85+	5	17	0	0	0	0	0	0	5	17	22
TOTALS	13	30	0	0	0	0	0	0	13	30	43

RES	IDENTS B	Y PAYMENT	SOURC	E AND LEV	EL OF CA	RE						
LEVEL			Other		Private	Charity			AVERAG	E DAILY P	AYMENT RA	TES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	S	LEVEL OF C	ARE	SINGLE I	DOUBLE
Nursing Care	5	17	0	0	21	0	43		Nursing Car	е	150	135
Skilled Under 22	0	0	0	0	0	0	0)	Skilled Unde	er 22	0	0
ICF/DD		0	0	0	0	0	0)	Intermediate	DD .	0	0
Sheltered Care			0	0	0	0	0	<u></u>	Shelter		0	0
TOTALS	5	17	0	0	21	0	43	}				
	RESIDE	NTS BY RAC	IAL/ETH	NICITY GRO	UPING					STAFFING	G	
		Nursing	Skilled		Shelte				EMPLOYMI		FULL-TI	
RACE		Care	Under 2	2 ICF/DI) Car	е	Totals		CATEGO	RY	EQUIVAL	.ENT
Asian		0	0	0		0	0		Administrators	;		1.00
American Indian		0	0	0		0	0		Physicians			0.00
Black		0	0	0		0	0		Director of Nu	rsing		1.00
Hawaiian/Pacific I	lsl.	0	0	0		0	0		Registered Nu	rses	5.00	
White		43	0	0		0	43		LPN's		1.00	
Race Unknown		0	0	0		0	0		Certified Aides	3	11.00	
Total		43	0	0		0	43		Other Health S	Staff	:	2.00
									Non-Health St	aff	1-	4.00
		Nursing	Skilled		Shelte	ered			Totals		3	5.00
ETHNICITY		Care	Under 2	2 ICF/DI	O Car	re	Totals					
Hispanic		0	0	0		0	0					
Non-Hispanic		43	0	0		0	43					
Ethnicity Unknow	n	0	0	0		0	0					
Total		43	0	0		0	43					
				NET REVE	NUE BY PA	AYOR S	OURCE (Fi	iscal Yea	r Data)			
										Charity	Charity	
Medicare	N	/ledicaid	Other F	Public Priv	ate Insura	ınce	Private Pa	ay	TOTALS	Care	Expense a	as % of

0.0%

0

41.0%

159,466

100.0%

388,938

Expense*

0

Total Net Revenue

0.0%

0.0%

0

27.5%

*Charity Expense does not include expenses which may be considered a community benefit.

106,849

31.5%

122,623

*Data Not Collected for 2015

Total Residents Diagnosed with Mental Illness 92

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

10

Reported Identified Offenders

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care	336	336	292	336	280	56	116	336	Residents on 1/1/2015 Total Admissions 2015	279 518
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	509
Intermediate DD	16	16	15	16	8	8		16	Residents on 12/31/2015	288
Sheltered Care	0	0	0	0	0	0			-	200
TOTAL BEDS	352	352	307	352	288	64	116	352		

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med		Medio		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	14,496	34.2%	67,171	54.8%	5,397	920	10,668	0	98,652	80.4%	80.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			4,704	80.5%	0	0	0	0	4,704	80.5%	80.5%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	14,496	34.2%	71,875	55.9%	5,397	920	10,668	0	103,356	80.4%	80.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	0	0	0	1	1	0	0	3	1	4
45 to 59	12	2	0	0	3	0	0	0	15	2	17
60 to 64	8	4	0	0	1	0	0	0	9	4	13
65 to 74	24	23	0	0	0	2	0	0	24	25	49
75 to 84	37	43	0	0	0	0	0	0	37	43	80
85+	32	93	0	0	0	0	0	0	32	93	125
TOTALS	115	165	0	0	5	3	0	0	120	168	288

LEVEL			Other		Private	Charity		AVERAGI	E DAILY P.	AYMENT R	ATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CA	ARE	SINGLE	DOUBL
Nursing Care	32	195	8	4	41	0	280	Nursing Care)	167	149
Skilled Under 22	0	0	0	0	0	0	0	Skilled Unde	r 22	0	C
ICF/DD		8	0	0	0	0	8	Intermediate	DD	112	111
Sheltered Care			0	0	0	0	0	Shelter		0	C
TOTALS	32	203	8	4	41	0	288				
	RESIDEN	ITS BY RAC	IAL/ETHN	ICITY GRO	UPING				STAFFING	 }	
		Nursing	Skilled		Shelter	ed		EMPLOYME	NT	FULL-T	IME
RACE		Care	Under 22	ICF/DE	Care	э Т	Totals	CATEGOR	RY	EQUIVA	LENT
Asian		0	0	0		0	0	Administrators			4.25
American Indian		0	0	0		0	0	Physicians			0.00
Black		13	0	1		0	14	Director of Nurs	sing		4.25
Hawaiian/Pacific I	sl.	0	0	0		0	0	Registered Nur	ses	22.48	
White		266	0	7		0	273	LPN's		;	27.53
Race Unknown		1	0	0		0	1	Certified Aides		10	07.89
Total		280	0	8		0	288	Other Health S	taff		19.00
								Non-Health Sta	aff	!	94.73
		Nursing	Skilled		Shelte	red		Totals		28	80.13
ETHNICITY		Care	Under 22	ICF/DE			Γotals				
Hispanic		2	0	0		0	2				
Non-Hispanic		278	0	8		0	286				
Ethnicity Unknow	า	0	0	0		0	0				
Total		280	0	8		0	288				
			N	NET REVEN	IUE BY PA	YOR SO	URCE (Fiscal Y	'ear Data)			
									Charity	Charit	y Care
Medicare	M	1edicaid	Other Pu	ublic Priv	ate Insura	nce	Private Pay	TOTALS	Care	Expense	as % of

						Charity	Charity Care
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of
38.6%	45.9%	3.1%	3.1%	9.3%	100.0%	Expense*	Total Net Revenue
7,536,035	8,967,746	601,452	604,482	1,807,574	19,517,289	0	0.0%

 $^{^{\}star}$ Charity Expense does not include expenses which may be considered a community benefit.

*Data Not Collected for 2015

Total Residents Diagnosed with Mental Illness

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	2	RESIDENTS BY PRIMARY DIAGNO DIAGNOSIS	OSIS*
	_	Aggressive/Anti-Social	3		_
TOTAL FACILITIES	4	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	0	Endocrine/Metabolic	0
FREE STANDING FACILITIES	4	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	3	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	1	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	1	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	4	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	4	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0

Reported Identified Offenders	3	Total Residents
LICENSED BEDS,	BEDS IN USE, MEDICA	RE/MEDICAID CERTIFIED BEDS

		•		•						
		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 201	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	B : 1	0.40
Nursing Care	299	287	250	286	242	57	164	166	Residents on 1/1/2015	249
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	298
Intermediate DD	16	16	8	16	8	8		16	Total Discharges 2015	297
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	250
TOTAL BEDS	315	303	258	302	250	65	164	182	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medio	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	7,523	12.6%	45,324	74.8%	3,575	3,953	24,936	110	85,421	78.3%	81.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			3,177	54.4%	102	0	0	0	3,279	56.1%	56.1%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	7,523	12.6%	48,501	73.0%	3,677	3,953	24,936	110	88,700	77.1%	80.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	0	1	0	0	2	3	0	0	2	4	6	
45 to 59	6	7	0	0	2	0	0	0	8	7	15	
60 to 64	1	11	0	0	0	0	0	0	1	11	12	
65 to 74	14	19	0	0	1	0	0	0	15	19	34	
75 to 84	20	59	0	0	0	0	0	0	20	59	79	
85+	17	87	0	0	0	0	0	0	17	87	104	
TOTALS	58	184	0	0	5	3	0	0	63	187	250	

17

RESI	IDENTS B	Y PAYMENT	SOURC	E AND LEVE	L OF CA	RE				
LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT I	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	20	127	13	3	79	0	242	Nursing Care	140	120
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		8	0	0	0	0	8	Intermediate DD	119	108
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	20	135	13	3	79	0	250			
	RESIDE	NTS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFFI	NG	
RACE		Nursing Care	Skilled Under 2	2 ICF/DD	Shelte Car		Totals	EMPLOYMENT CATEGORY	FULL- EQUIV	
Asian		0	0	0		0	0	Administrators		4.25
American Indian		0	0	0		0	0	Physicians		0.00
Black		10	0	0		0	10	Director of Nursing		2.00
Hawaiian/Pacific Is	sl.	0	0	0		0	0	Registered Nurses		27.00
White		232	0	8		0	240	LPN's		28.00
Race Unknown		0	0	0		0	0	Certified Aides	•	123.50
Total		242	0	8		0	250	Other Health Staff		22.50
								Non-Health Staff		53.00
		Nursing	Skilled		Shelte		T-1-1-	Totals	2	260.25

ET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Care

0

0

0

0

Totals

0

0

250

250

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
28.3%	38.2%	1.6%	5.7%	26.3%	100.0%	Expense*	Total Net Revenue	
2,021,033	2,728,311	114,040	405,391	1,880,077	7,148,852	11,943	0.2%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

Under 22

0

0

0

0

Care

0

0

242

242

ETHNICITY Hispanic

Total

Non-Hispanic

Ethnicity Unknown

ICF/DD

0

8

0

8

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	2	DIAGNOSIS	
TOTAL FACILITIES	3	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	3	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	3	Mental Illness	2	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	2	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	1	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	2	Total Residents	Diagnose	d with Mental Illness	4

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

		,		•						
		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 2015	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D 11 / 1/1/0045	000
Nursing Care	340	250	220	234	189	151	297	340	Residents on 1/1/2015	206
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	359
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	376
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	189
TOTAL BEDS	340	250	220	234	189	151	297	340	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medi	icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	9,398	8.7%	37,163	29.9%	8	288	22,611	2,941	72,409	58.3%	79.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	9,398	8.7%	37,163	29.9%	8	288	22,611	2,941	72,409	58.3%	79.4%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	5	4	0	0	0	0	0	0	5	4	9
60 to 64	3	0	0	0	0	0	0	0	3	0	3
65 to 74	16	15	0	0	0	0	0	0	16	15	31
75 to 84	9	39	0	0	0	0	0	0	9	39	48
85+	22	76	0	0	0	0	0	0	22	76	98
TOTALS	55	134	0	0	0	0	0	0	55	134	189

RES	IDENTS B	Y PAYMENT	SOURC	E AND LEVE	EL OF CA	RE						
LEVEL			Other		Private	Charity			AVERAGE DAILY			
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTAL	S	LEVEL OF CARE	SINGLE	DOUBLE	
Nursing Care	25	111	0	0	53	0	189		Nursing Care	165	133	
Skilled Under 22	0	0	0	0	0	0	0		Skilled Under 22	0	0	
ICF/DD		0	0	0	0	0	0		Intermediate DD	0	0	
Sheltered Care			0	0	0	0	0	<u> </u>	Shelter	0	0	
TOTALS	25	111	0	0	53	0	189					
	RESIDEN	ITS BY RAC	IAL/ETH	NICITY GRO	UPING				STAFF	ING		
RACE		Nursing Care	Skilled Under 2	2 ICF/DE	Shelte Car		Totals		EMPLOYMENT CATEGORY	FULL- EQUIV		
Asian									A desiniatento es		3.00	
		0	0			0	0		Administrators			
American Indian		0	0	_		0	0		Physicians		9.00	
Black		2	0	_		0	2		Director of Nursing		3.00	
Hawaiian/Pacific	ISI.	0	0			0	0		Registered Nurses		30.00	
White		187	0			0	187		LPN's		29.00	
Race Unknown		0	0	0		0	0		Certified Aides		98.00	
Total		189	C	0		0	189		Other Health Staff		25.00	
									Non-Health Staff	1	08.00	
		Nursing	Skilled		Shelte	ered			Totals	3	805.00	
ETHNICITY		Care	Under 2	22 ICF/DE) Cai	re	Totals					
Hispanic		0	C	0		0	0					
Non-Hispanic		189	C	0		0	189					
Ethnicity Unknow	n	0	C	0		0	0					
Total		189	C	0		0	189					

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
30.5%	44.5%	0.1%	0.9%	24.0%	100.0%	Expense*	Total Net Revenue	
3,862,608	5,643,713	10,250	108,376	3,045,580	12,670,527	92,779	0.7%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

LIFE CARE FACILITY *Data Not Collected for 2015

No Restrictions

Total Residents Diagnosed with Mental Illness

TOTALS

Other Medical Conditions

Non-Medical Conditions

125

0

0

0

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

0

1

7

CONTINUING CARE COMMUNITY

Reported Identified Offenders

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	_
Nursing Care Skilled Under 22 Intermediate DD	509 0 148	497 0 148	437 0 144	490 0 132	393 0 142	116 0 6	353	487 0 141	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015	556 1,197 1,066
Sheltered Care TOTAL BEDS	0 657	0 645	581	0 622	535	0 122	353	628	Residents on 12/31/2015	687

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	29,512	22.9%	83,211	46.8%	376	2,796	26,283	0	142,178	76.5%	78.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			50,788	98.7%	0	0	0	0	50,788	94.0%	94.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	29,512	22.9%	133,999	58.5%	376	2,796	26,283	0	192,966	80.5%	82.0%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	15	10	0	0	15	11	26
45 to 59	14	8	0	0	29	28	0	0	43	36	79
60 to 64	8	5	0	0	10	14	0	0	18	19	37
65 to 74	17	33	0	0	16	11	0	0	33	44	77
75 to 84	30	59	0	0	3	4	0	0	33	63	96
85+	61	157	0	0	1	1	0	0	62	158	220
TOTALS	130	263	0	0	74	68	0	0	204	331	535

Marion

LEVEL			Other		Private	Charity		AVERAGE DAILY F	AYMENT RA	ATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	86	233	2	6	66	0	393	Nursing Care	165	151
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		142	0	0	0	0	142	Intermediate DD	134	309
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	86	375	2	6	66	0	535			
	RESIDE	NTS BY RAC	IAL/ETHN	ICITY GRO	UPING			STAFFIN	G	
		Nursing	Skilled		Shelter			EMPLOYMENT	FULL-TI	
RACE		Care	Under 22	ICF/DI) Care	9	Totals	CATEGORY	EQUIVAL	LENT
Asian		0	0	1		0	1	Administrators		8.25
American Indian		0	0	0		0	0	Physicians		1.00
Black		10	0	28		0	38	Director of Nursing		6.00
Hawaiian/Pacific I	sl.	0	0	0		0	0	Registered Nurses	3	7.00
White		383	0	113		0	496	LPN's	6	6.00
Race Unknown		0	0	0		0	0	Certified Aides	359.00	
Total		393	0	142	(0	535	Other Health Staff		7.00
								Non-Health Staff	14	5.00
		Nursing	Skilled		Shelter	red		Totals	65	9.25
ETHNICITY		Care	Under 22	ICF/DI) Care	Э	Totals			
Hispanic		1	0	0		0	1			
Non-Hispanic		392	0	142		0	534			
Ethnicity Unknown	า	0	0	0		0	0			
Total		393	0	142		0	535			
			N	NET REVEN	NUE BY PA	YOR S	OURCE (Fisca	Year Data)		
								Charity	Charity	
Medicare	N	/ledicaid	Other Pu		/ate Insurai		Private Pay	TOTALS Care	Expense a	
30.1%		54.4%	0).9%	2.	5%	12.1%	100.0% Expense*	Total Net	
14,248,151		25,732,746	425,	655	1,198,3	21	5,741,074	47,345,947 0	0	0.0%

Reported Identified Offenders	0	Total Residents Diagnosed with Mental Illness
LICENSED BEDS, B	EDS IN USE, MED	DICARE/MEDICAID CERTIFIED BEDS

		-,		,	-	-	_			
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	
Nursing Care	210	210	138	210	128	82	29	210	Residents on 1/1/2015 Total Admissions 2015	124 188
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	184
Intermediate DD Sheltered Care	0	0	0	0	0	0		0	Residents on 12/31/2015	128
TOTAL BEDS	210	210	138	210	128	82	29	210	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	5,723	54.1%	26,390	34.4%	0	0	12,778	0	44,891	58.6%	58.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	5,723	54.1%	26,390	34.4%	0	0	12,778	0	44,891	58.6%	58.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	5	1	0	0	0	0	0	0	5	1	6
60 to 64	1	6	0	0	0	0	0	0	1	6	7
65 to 74	9	9	0	0	0	0	0	0	9	9	18
75 to 84	13	26	0	0	0	0	0	0	13	26	39
85+	11	47	0	0	0	0	0	0	11	47	58
TOTALS	39	89	0	0	0	0	0	0	39	89	128

0

LEVEL	INEN 19 R	Y PAYMENT	Other	E AND LEV	Private	RE Charit	h.		AVED AC	E DAILY PA	VMENT DA	TEC
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	,	LS	LEVEL OF C			DOUBLE
Nursing Care	15	79	0	0	34	0	12	28	Nursing Car	·e	153	138
Skilled Under 22	0	0	0	0	0	0		0	Skilled Under	er 22	0	0
ICF/DD		0	0	0	0	0		0	Intermediate	e DD	0	0
Sheltered Care			0	0	0	0		0	Shelter		0	0
TOTALS	15	79	0	0	34	0	12	28				
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GRO	OUPING					STAFFING		
		Nursing	Skilled		Shelte				EMPLOYM		FULL-TII	
RACE		Care	Under 22	2 ICF/DI	D Car	е	Totals		CATEGO	RY	EQUIVAL	ENT
Asian		0	0	C)	0	0	-	Administrators	S	;	3.00
American Indian		0	0	C)	0	0		Physicians			1.00
Black		2	0	C)	0	2		Director of Nu	rsing	;	3.00
Hawaiian/Pacific I	sl.	0	0	C)	0	0		Registered Nu	ırses	-	7.00
White		126	0	C)	0	126		LPN's		1	1.00
Race Unknown		0	0	C)	0	0		Certified Aides	3	50	0.50
Total		128	0	C)	0	128	-	Other Health S	Staff	(0.00
									Non-Health St	aff	50	0.00
		Nursing	Skilled		Shelte	ered			Totals		12	5.50
ETHNICITY		Care	Under 2	2 ICF/D			Totals					
Hispanic		0	0	0		0	0	-				
Non-Hispanic		128	0	0		0	128					
Ethnicity Unknown	า	0	0	0		0	0					
Total		128	0	0		0	128	-				
				NET REVE	NUE BY P	AYOR S	OURCE ((Fiscal Ye	ear Data)			
										Charity	Charity	Care
Medicare	N	Medicaid	Other F	Public Pri	vate Insura	ance	Private	Pay	TOTALS	Care	Expense a	s % of
24.3%		38.2%		0.8%	1	.0%	3	5.7%	100.0%	Expense*	Total Net I	Revenue
1,633,978		2,575,838	52	.,358	69,0	094	2,406	,113	6,737,381	0	0.	0%

LIEALTH CEDVICE ADEA	005	ADMICCION DECEDICATIONS		DECIDENTS BY DRIMARY DIACAL	2010*
HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS Aggressive/Anti-Social	1	RESIDENTS BY PRIMARY DIAGNO DIAGNOSIS	J919"
TOTAL FACILITIES	7	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	7	Drug Addiction	3	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	5	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	2	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	7	Skin Disorders	0
NON-PROFIT OWNERSHIP	2	Infectious Disease w/ Isolation	2	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	4	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	12	Total Residents	s Diagnosed	with Mental Illness	31

	LICENSED	BEDS, BEI	DS IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	D BEDS			
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care Skilled Under 22 Intermediate DD	490 0 32	424 0 32	352 0 26	422 0 32	324 0 26	166 0 6	313	484 0 32	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	366 381 397 350
Sheltered Care TOTAL BEDS	522	0 456	378	0 454	350	0 172	313	516	-	550

	Med	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	10,279	9.0%	61,918	35.0%	0	814	45,168	0	118,179	66.1%	76.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			9,067	77.6%	0	0	0	0	9,067	77.6%	77.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,279	9.0%	70,985	37.7%	0	814	45,168	0	127,246	66.8%	76.5%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	MED. DD	SHEI	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	4	1	0	0	2	2	0	0	6	3	9
45 to 59	11	4	0	0	3	4	0	0	14	8	22
60 to 64	8	4	0	0	3	4	0	0	11	8	19
65 to 74	19	22	0	0	4	2	0	0	23	24	47
75 to 84	31	54	0	0	0	1	0	0	31	55	86
85+	28	138	0	0	0	1	0	0	28	139	167
TOTALS	101	223	0	0	12	14	0	0	113	237	350

LEVEL		Y PAYMENT	Other		Private	Charity			E DAILY PA		
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF C	ARE	SINGLE [OOUBLE
Nursing Care	33	159	0	3	129	0	324	Nursing Care	е	195	142
Skilled Under 22	0	0	0	0	0	0	0	Skilled Unde	er 22	0	0
ICF/DD		26	0	0	0	0	26	Intermediate	DD .	0	111
Sheltered Care			0	0	0	0	0	Shelter		0	0
TOTALS	33	185	0	3	129	0	350				
	RESIDEN	NTS BY RAC	IAL/ETHI	NICITY GR	DUPING				STAFFING		
		Nursing	Skilled		Shelte	red		EMPLOYME	ENT	FULL-TIN	
RACE		Care	Under 22	2 ICF/D	D Car	е	Totals	CATEGOR	₹Y	EQUIVAL	ENT
Asian		0	0	()	0	0	Administrators			9.50
American Indian		0	0	()	0	0	Physicians		(0.00
Black		5	0	7	,	0	12	Director of Nursing		Ę	5.00
Hawaiian/Pacific I	sl.	0	0	()	0	0	Registered Nurses		22.50	
White		319	0	19)	0	338	LPN's		46.00	
Race Unknown		0	0	()	0	0	Certified Aides		139.00	
Total		324	0	26	3	0	350	Other Health S		21.0	
								Non-Health Sta	aff	105	5.00
		Nursing	Skilled		Shelte	ered		Totals		348	3.00
ETHNICITY		Care	Under 2	2 ICF/D	D Ca	re	Totals				
Hispanic		0	0	C)	0	0				
Non-Hispanic		324	0	26	i	0	350				
Ethnicity Unknown	า	0	0	C)	0	0				
Total		324	0	26	i	0	350				
				NET REVE	NUE BY P	AYOR SO	OURCE (Fiscal	Year Data)			
									Charity	Charity	Care
Medicare	N	/ledicaid	Other P	Public Pr	vate Insura	nce	Private Pay	TOTALS	Care	Expense a	s % of
23.5%		43.5%		0.0%	2	.1%	30.8%	100.0%	Expense*	Total Net F	Revenue
4,697,917		8,688,595		0	421,0	002	6,158,521	19,966,035	0	0.	.0%

Aggressive/Anti-Social 1 DIAGNOSIS TOTAL FACILITIES 3 Chronic Alcoholism 0 Neoplasms HOSPITAL BASED UNITS 1 Developmentally Disabled 0 Endocrine/Metal FREE STANDING FACILITIES 2 Drug Addiction 2 Blood Disorders Medicaid Recipient 0 Nervous System Medicaid Recipient 0 Alzheimer Dis NURSING CARE BEDS ONLY 3 Mental Illness 1 Mental Illness DD CARE BEDS ONLY 0 Non-Ambulatory 0 Developmental I MULTI-LICENSED FACILITIES 0 Non-Mobile 0 Circulatory System Public Aid Recipient 0 Respiratory System FACILITIES REPORTED BY Under 65 Years Old 0 Digestive System GOVERNMENTAL OWNERSHIP 1 Ventilator Dependent 3 Skin Disorders NON-PROFIT OWNERSHIP 1 Ventilator Dependent 3 Skin Disorders NON-PROFIT OWNERSHIP 2 Other Restrictions 0 Injuries and Pois NO Restrictions 0 Other Medical Co CONTINUING CARE COMMUNITY 0 LIFE CARE FACILITY 0 TOTALS		
TOTAL FACILITIES HOSPITAL BASED UNITS TOTAL FREE STANDING FACILITIES HOSPITAL BASED UNITS TREE STANDING FACILITIES Developmentally Disabled Developmentally Medicare Recipient Medicare Recipient Mental Illness Mental Illness Mental Illness Mental Illness Developmental Interval Disabled Mental Illness Developmental Interval Disabled Developmentally	RESIDENTS BY PRIMARY DIAGNO	OSIS*
HOSPITAL BASED UNITS FREE STANDING FACILITIES Drug Addiction Medicaid Recipient Medicaid		(
FREE STANDING FACILITIES 2 Drug Addiction 2 Blood Disorders Medicaid Recipient 0 Nervous System Medicare Recipient 0 Alzheimer Dis NURSING CARE BEDS ONLY 3 Mental Illness 1 Mental Illness DD CARE BEDS ONLY 0 Non-Ambulatory 0 Developmental Industry 0 Non-Mobile 0 Circulatory System Public Aid Recipient 0 Respiratory System Public Aid Recipient 0 Respiratory System OWNERSHIP TYPE 0 Unable to Self-Medicate 0 Genitourinary System NON-PROFIT OWNERSHIP 1 Ventilator Dependent 1 Skin Disorders NOR-PROFIT OWNERSHIP 2 Other Restrictions No Restrictions No Restrictions No Restrictions 1 Non-Medical Continuing Care Community 1 Vental Residents Diagnosed with Mental Illness 1 Total Residents Diagnosed with Mental Illness 1 Total Residents Diagnosed with Mental Illness	'	(
Medicaid Recipient 0 Nervous System FACILITIES LICENSED FOR: Medicare Recipient 0 Alzheimer Dis NURSING CARE BEDS ONLY 3 Mental Illness 1 Mental Illness DD CARE BEDS ONLY 0 Non-Ambulatory 0 Developmental I MULTI-LICENSED FACILITIES 0 Non-Mobile 0 Circulatory System Public Aid Recipient 0 Respiratory System Public Aid Recipient 0 Digestive System OWNERSHIP TYPE Unable to Self-Medicate 0 Genitourinary System GOVERNMENTAL OWNERSHIP 1 Ventilator Dependent 3 Skin Disorders NON-PROFIT OWNERSHIP 0 Infectious Disease w/ Isolation 0 Musculo-skeleta FOR PROFIT OWNERSHIP 2 Other Restrictions 0 Injuries and Pois NO Restrictions 0 Other Medical Company of the		(
FACILITIES LICENSED FOR: NURSING CARE BEDS ONLY DD CARE BEDS ONLY MULTI-LICENSED FACILITIES NON-Ambulatory MULTI-LICENSED FACILITIES NON-Mobile Public Aid Recipient ORespiratory System OWNERSHIP TYPE GOVERNMENTAL OWNERSHIP NON-PROFIT OWNERSHIP FOR PROFIT OWNERSHIP CONTINUING CARE COMMUNITY Reported Identified Offenders Medicare Recipient Medicare Recipient Non-Ambulatory Non-Ambulatory Non-Ambulatory Non-Ambulatory Non-Ambulatory Non-Medical Control Non-Medical Control Total Residents Diagnosed with Mental Illness 1 Menta		(
NURSING CARE BEDS ONLY DD CARE BEDS ONLY MULTI-LICENSED FACILITIES Non-Ambulatory MULTI-LICENSED FACILITIES Non-Mobile Public Aid Recipient Under 65 Years Old Operative System OWNERSHIP TYPE GOVERNMENTAL OWNERSHIP NON-PROFIT OWNERSHIP FOR PROFIT OWNERSHIP TOR PROFIT OWNERSHIP NOR-BESTITE OF TOTALS CONTINUING CARE COMMUNITY Reported Identified Offenders NON-PROFIT Offenders NOR-BESTITE OF TOTALS *Data Not Collect Total Residents Diagnosed with Mental Illness 1 Mental Illnes	•	(
DD CARE BEDS ONLY MULTI-LICENSED FACILITIES 0 Non-Mobile Public Aid Recipient O Respiratory System Public Aid Recipient O Digestive System OWNERSHIP TYPE GOVERNMENTAL OWNERSHIP 1 Ventilator Dependent FOR PROFIT OWNERSHIP 2 Other Restrictions No Restrictions No Restrictions O Other Medical Continuing Care Community Non-Medical Continuing Care Community Reported Identified Offenders 2 Total Residents Diagnosed with Mental Illness		(
MULTI-LICENSED FACILITIES 0 Non-Mobile Public Aid Recipient O Respiratory System Public Aid Recipient O Respiratory System OWNERSHIP TYPE Unable to Self-Medicate O Genitourinary System OWN-PROFIT OWNERSHIP O Infectious Disease w/ Isolation OWNERSHIP O Other Restrictions No Restrictions No Restrictions O Other Medical Continuing Care Community O LIFE CARE FACILITY Reported Identified Offenders O Non-Mobile O Respiratory System O Digestive System O Genitourinary System O Government System O Government System O Genitourinary System O Government System O Government System O Genitourinary System O Government System O Governmen		(
Public Aid Recipient 0 Respiratory Sys Under 65 Years Old 0 Digestive System OWNERSHIP TYPE Unable to Self-Medicate 0 Genitourinary Sys NON-PROFIT OWNERSHIP 1 Ventilator Dependent 3 Skin Disorders NON-PROFIT OWNERSHIP 0 Infectious Disease w/ Isolation 0 Musculo-skeleta FOR PROFIT OWNERSHIP 2 Other Restrictions 0 Injuries and Pois No Restrictions 0 Other Medical Co Non-Medical Co TOTALS *Data Not Collect Reported Identified Offenders 2 Total Residents Diagnosed with Mental Illness		(
FACILITIES REPORTED BY OWNERSHIP TYPE GOVERNMENTAL OWNERSHIP NON-PROFIT OWNERSHIP FOR PROFIT OWNERSHIP CONTINUING CARE COMMUNITY LIFE CARE FACILITY Under 65 Years Old Under 65 Years Old Unable to Self-Medicate U	• •	(
OWNERSHIP TYPE GOVERNMENTAL OWNERSHIP NON-PROFIT OWNERSHIP FOR PROFIT OWNERSHIP Other Restrictions No Restrictions No Restrictions No Restrictions Total Residents Diagnosed with Mental Illness	, , ,	(
GOVERNMENTAL OWNERSHIP 1 Ventilator Dependent 3 Skin Disorders NON-PROFIT OWNERSHIP 0 Infectious Disease w/ Isolation 0 Musculo-skeleta FOR PROFIT OWNERSHIP 2 Other Restrictions 0 Injuries and Pois No Restrictions 0 Other Medical Co Non-Medical Co TOTALS *Data Not Collect Reported Identified Offenders 2 Total Residents Diagnosed with Mental Illnes	9	(
NON-PROFIT OWNERSHIP O Infectious Disease w/ Isolation O Musculo-skeleta FOR PROFIT OWNERSHIP Other Restrictions No Restrictions O Other Medical Continuing Care Community LIFE CARE FACILITY O TOTALS *Data Not Collect Reported Identified Offenders 2 Total Residents Diagnosed with Mental Illness		(
FOR PROFIT OWNERSHIP 2 Other Restrictions No Restrictions 0 Other Medical Continuing Care Community 0 Non-Medical Continuing Care Facility 0 TOTALS *Data Not Collect Reported Identified Offenders 2 Total Residents Diagnosed with Mental Illness		(
No Restrictions O Other Medical Continuing Care Community ILIFE CARE FACILITY Non-Medical Continuing Care Community Totals *Data Not Collect Reported Identified Offenders Total Residents Diagnosed with Mental Illness		(
CONTINUING CARE COMMUNITY 0 Non-Medical Continuing CARE FACILITY 0 TOTALS *Data Not Collect Reported Identified Offenders 2 Total Residents Diagnosed with Mental Illness	,	(
LIFE CARE FACILITY 0 TOTALS *Data Not Collect Reported Identified Offenders 2 Total Residents Diagnosed with Mental Illnes	Non-Medical Conditions	(
Reported Identified Offenders 2 Total Residents Diagnosed with Mental Illnes	TOTALS	(
	*Data Not Collected for 2015	
LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS	osed with Mental Illness	34
PEAK PEAK LICENSED BEDS BEDS BEDS AVAILABLE MEDICARE MEDICAID	ADMISSIONS AND)

	LICENSED	BEDS, BEI	DS IN US	E, MEDICA	ARE/MEDI	CAID CERTIFIE	ED BEDS			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents on 4/4/0045	047
Nursing Care	309	276	240	276	212	97	289	255	Residents on 1/1/2015	217
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015 Total Discharges 2015	429 434
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2015	212
Sheltered Care	0	0	0	0	0	0			-	212
TOTAL BEDS	309	276	240	276	212	97	289	255		

	Med	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	12,591	11.9%	39,567	42.5%	135	648	27,521	0	80,462	71.3%	79.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	12,591	11.9%	39,567	42.5%	135	648	27,521	0	80,462	71.3%	79.9%

		RESIDE	NTS BY A	GE GROUP, S	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	4	4	0	0	0	0	0	0	4	4	8
60 to 64	3	6	0	0	0	0	0	0	3	6	9
65 to 74	10	11	0	0	0	0	0	0	10	11	21
75 to 84	16	42	0	0	0	0	0	0	16	42	58
85+	24	92	0	0	0	0	0	0	24	92	116
TOTALS	57	155	0	0	0	0	0	0	57	155	212

LEVEL			Other		Private	Charity		AVERAGE DAILY PAYMENT RATES
OF CARE	Medicare	Medicaid		Insurance	Pay	Care	TOTALS	LEVEL OF CARE SINGLE DOUBL
Nursing Care	23	103	0	1	85	0	212	Nursing Care 165 14
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22 0
ICF/DD		0	0	0	0	0	0	Intermediate DD 0
Sheltered Care			0	0	0	0	0	Shelter 0
TOTALS	23	103	0	1	85	0	212	
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING			STAFFING
RACE		Nursing Care	Skilled Under 22	2 ICF/DD	Sheltere Care		Totals	EMPLOYMENT FULL-TIME CATEGORY EQUIVALENT
Asian		1		0	0		1	Administrators 3.00
Asian American Indian		0	0	0	(0	Physicians 0.00
Black		1	0	0	(1	Director of Nursing 3.00
Hawaiian/Pacific I	cl	0	0	0	(0	Registered Nurses 32.40
White	01.	210	0	0	C		210	LPN's 19.00
Race Unknown		0	0	0	Č		0	Certified Aides 76.10
Total		212	0	0	C)	212	Other Health Staff 6.00
								Non-Health Staff 72.90
ETHNICITY		Nursing Care	Skilled Under 22	2 ICF/DE	Shelter Care		Totals	Totals 212.40
Hispanic		0	0	0	()	0	
Non-Hispanic		212	0	0	()	212	
Ethnicity Unknown	า	0	0	0	()	0	
Total		212	0	0	()	212	
				NET REVEN	IUE BY PA	YOR S	OURCE (Fisc	cal Year Data)
								Charity Charity Care
Medicare	N	Medicaid	Other P	ublic Priv	ate Insuran	ice	Private Pay	TOTALS Care Expense as % of
41.0%		30.2%	(0.1%	1.8		26.8%	, , , , , , , , , , , , , , , , , , , ,
6,475,371		4,763,021	14	,000	291,15	52	4,232,199	15,775,743 0 0.0%

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	NSIS*
TIERETTI SERVICE AREA	003	Aggressive/Anti-Social	2	DIAGNOSIS	0313
TOTAL FACILITIES	6	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	6	Drug Addiction	3	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	5	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	3	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	5	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	2	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	11	Total Residents	Diagnosed	with Mental Illness	104

	LICENSED	BEDS, BEI	OS IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	ED BEDS			
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	293 0 64 0	293 0 64 0	241 0 47 0	293 0 64 0	228 0 46 0	65 0 18 0	99	231 0 64	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	272 303 301 274
TOTAL BEDS	357	357	288	357	274	83	99	295	-	

	Med	icare	Medi	icaid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	5,873	16.3%	44,687	53.0%	2,576	601	28,263	0	82,000	76.7%	76.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			7,285	31.2%	0	0	0	0	7,285	31.2%	31.2%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	5,873	16.3%	51,972	48.3%	2,576	601	28,263	0	89,285	68.5%	68.5%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DEC	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	3	0	0	0	6	9	0	0	9	9	18
45 to 59	9	12	0	0	17	4	0	0	26	16	42
60 to 64	7	3	0	0	3	0	0	0	10	3	13
65 to 74	36	19	0	0	3	0	0	0	39	19	58
75 to 84	30	25	0	0	0	4	0	0	30	29	59
85+	41	43	0	0	0	0	0	0	41	43	84
TOTALS	126	102	0	0	29	17	0	0	155	119	274

LEVEL			Other		L OF CARI Private	– Charity		ΔVFR Δ(GE DAILY PA	YMENT RA	TES
OF CARE	Medicare	Medicaid		Insurance	Pay	Care	TOTALS	LEVEL OF C			DOUBLE
Nursing Care	21	123	0	2	82	0	228	Nursing Ca	re	142	153
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	ler 22	0	0
ICF/DD		46	0	0	0	0	46	Intermediat	e DD	122	115
Sheltered Care			0	0	0	0	0	Shelter		135	0
TOTALS	21	169	0	2	82	0	274				
	RESIDE	NTS BY RAC	IAL/ETHN	ICITY GRO	UPING				STAFFING		
		Nursing Care	Skilled Under 22	ICF/DD	Sheltere Care		Totals	EMPLOYM CATEGO		FULL-TII EQUIVAL	
RACE		Care	Under 22	ICF/DD	Care		Totals	CATEGO	ואיל	EQUIVAL	.EIN I
Asian		1	0	0	0		1	Administrators	s	-	7.00
American Indian		0	0	0	0		0	Physicians			1.00
Black		15	0	14	0		29	Director of Nu	ırsing	!	5.00
Hawaiian/Pacific I	sl.	0	0	0	0		0	Registered No	urses	24	4.00
White		212	0	32	0		244	LPN's		3	4.00
Race Unknown		0	0	0	0		0	Certified Aide		12 ⁻	1.00
Total		228	0	46	0		274	Other Health S			3.00 3.00
		Nursing	Skilled		Sheltere	ed		Totals			8.00
ETHNICITY		Care	Under 22	ICF/DD	Care		Totals				
Hispanic		1	0	0	C)	1				
Non-Hispanic		227	0	46	C)	273				
Ethnicity Unknowr	า	0	0	0	C)	0				
Total		228	0	46	C)	274				
			N	IET REVEN	UE BY PA	OR S	OURCE (Fiscal Y	(ear Data)			
									Charity	Charity	
Medicare	1	Medicaid	Other Pu		ate Insuran		Private Pay	TOTALS	Care	Expense a	
17.0%		44.0%	23	.8%	1.6	%	13.6%	100.0%	Expense*	Total Net I	Revenue
2,658,136		6,862,780	3,711,	336	251,56	7	2,114,170	15,597,989	0	0.	.0%

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	4	RESIDENTS BY PRIMARY DIAGNO DIAGNOSIS	OSIS*
TOTAL FACILITIES	•	Aggressive/Anti-Social Chronic Alcoholism	1		0
TOTAL FACILITIES	3		2	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	2	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	0	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	2	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	1	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	1	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	0	Total Residen	ts Diagnosed	with Mental Illness	34

	LICENSED	BEDS, BEI	DS IN US	E, MEDICA	ARE/MEDI	CAID CERTIFIE	ED BEDS			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 2015	j
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents at 4/4/0045	400
Nursing Care	178	178	134	125	123	55	37	230	Residents on 1/1/2015	133 144
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015 Total Discharges 2015	144
Intermediate DD	16	16	15	16	13	3		16	Residents on 12/31/2015	136
Sheltered Care	0	0	0	0	0	0			- Residents on 12/31/2013	130
TOTAL BEDS	194	194	149	141	136	58	37	246		

			_	-	_						
					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Medio	caid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	2,913	21.6%	17,600	21.0%	0	112	24,586	0	45,211	69.6%	69.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			2,921	50.0%	0	0	0	0	2,921	50.0%	50.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	2,913	21.6%	20,521	22.9%	0	112	24,586	0	48,132	68.0%	68.0%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	MBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	MED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	2	1	0	0	2	1	3
45 to 59	1	0	0	0	1	3	0	0	2	3	5
60 to 64	1	0	0	0	2	1	0	0	3	1	4
65 to 74	4	4	0	0	0	1	0	0	4	5	9
75 to 84	6	22	0	0	1	1	0	0	7	23	30
85+	18	67	0	0	0	0	0	0	18	67	85
TOTALS	30	93	0	0	6	7	0	0	36	100	136

LTC PLANNING AREA

LEVEL			Other		Private	Charity			AVERAGE DAILY	PAYMENT I	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTA	LS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	8	47	0	0	68	0	12	23	Nursing Care	147	122
Skilled Under 22	0	0	0	0	0	0		0	Skilled Under 22	0	0
ICF/DD		13	0	0	0	0	•	13	Intermediate DD	0	120
Sheltered Care			0	0	0	0		0	Shelter	0	0
TOTALS	8	60	0	0	68	0	13	36			
	RESIDEN	ITS BY RAC	IAL/ETHI	NICITY GRO	UPING				STAFFI	NG	
RACE		Nursing Care	Skilled Under 2	2 ICF/DD	Shelte Car		Totals		EMPLOYMENT CATEGORY		
Asian		0	0	0		0	0		Administrators		1.25
American Indian		0	0	0		0	0		Physicians		0.00
Black		0	0	3		0	3		Director of Nursing		1.00
Hawaiian/Pacific I	sl.	0	0	0		0	0		Registered Nurses		7.25
White		122	0	10		0	132		LPN's		16.90
Race Unknown		1	0	0		0	1		Certified Aides		25.40
Total		123	0	13		0	136	-	Other Health Staff		8.80
									Non-Health Staff		42.00
		Nursing	Skilled		Shelte	ered			Totals	,	102.60
ETHNICITY		Care	Under 2	2 ICF/DD			Totals				
Hispanic		0	0	0		0	0	=			
Non-Hispanic		123	0	13		0	136				
Ethnicity Unknown	า	0	0	0		0	0				
Total		123	0	13		0	136	=			

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
20.7%	33.9%	0.0%	0.9%	44.5%	100.0%	Expense*	Total Net Revenue	
1,549,915	2,536,902	0	64,410	3,329,694	7,480,921	0	0.0%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	1	DIAGNOSIS	
TOTAL FACILITIES	3	Chronic Alcoholism	1	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	2	Drug Addiction	1	Blood Disorders	0
		Medicaid Recipient	1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	3	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	3	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	2	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	7	Total Residents	Diagnosed	l with Mental Illness	0

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	5
Nursing Care	169	152	142	152	125	44	134	139	Residents on 1/1/2015	12
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	35
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015	35
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	12
TOTAL BEDS	169	152	142	152	125	44	134	139	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Med	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	7,201	14.7%	19,788	39.0%	846	394	13,356	0	41,585	67.4%	75.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	7,201	14.7%	19,788	39.0%	846	394	13,356	0	41,585	67.4%	75.0%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	0	2	0	0	0	0	0	0	0	2	2
60 to 64	4	1	0	0	0	0	0	0	4	1	5
65 to 74	13	9	0	0	0	0	0	0	13	9	22
75 to 84	9	21	0	0	0	0	0	0	9	21	30
85+	18	48	0	0	0	0	0	0	18	48	66
TOTALS	44	81	0	0	0	0	0	0	44	81	125

RES LEVEL	SIDENTS B	Y PAYMENT	Other	E AND LE	VEL OF Priva	_				AVERAG	SE DAILY BA	VMENT D	ATEC
OF CARE	Medicare	Medicaid	Public	Insurance			Charity Care	TOTALS	S	LEVEL OF C	GE DAILY PA Fare		DOUBLE
Nursing Care	16	51	19	3	3(6	0	125		Nursing Ca	re	149	140
Skilled Under 22	0	0	0	0	(0	0	0)	Skilled Und		0	0
ICF/DD		0	0	0	(0	0	0)	Intermediat	e DD	0	0
Sheltered Care			0	0	(0	0	0)	Shelter		0	0
TOTALS	16	51	19	3	30	6	0	125					
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GF	ROUPING	G					STAFFING		
		Nursing	Skilled		Sh	neltere	d			EMPLOYM	ENT	FULL-T	IME
RACE		Care	Under 2	2 ICF/[DD	Care	Т	otals		CATEGO	RY	EQUIVA	LENT
Asian		0	0		0	0		0		Administrators	S		3.00
American Indian		0	0		0	0		0		Physicians			0.00
Black		0	0		0	0		0		Director of Nu	rsing		3.00
Hawaiian/Pacific	Isl.	0	0		0	0		0		Registered Nu	ırses	1	9.00
White		125	0		0	0		125		LPN's		1	0.00
Race Unknown		0	0		0	0		0		Certified Aides	-	6	00.00
Total		125	0)	0	0		125		Other Health	Staff		9.00
										Non-Health St	taff	5	51.00
		Nursing	Skilled		Sł	heltere	ed			Totals		15	55.00
ETHNICITY		Care	Under 2	2 ICF/I	DD	Care	T	otals					
Hispanic		1	0)	0	0		1					
Non-Hispanic		124	0)	0	0		124					
Ethnicity Unknow	'n	0	0	1	0	0		0					
Total		125	0	1	0	0		125					
				NET REV	ENUE B	Y PAY	OR SO	URCE (F	iscal Yea	ar Data)			
											Charity	Charity	Care
Medicare	N	Medicaid	Other F	Public P	rivate In	suran	ce	Private P	ay	TOTALS	Care	Expense	as % of
36.2%		38.2%		0.0%		1.79	%	23.	8%	100.0%	Expense*	Total Net	Revenue
2,724,261		2,877,676		0	1	30,26	4	1,794,8	81	7,527,082	0	C	0.0%

LICENSED BEDS. BEDS. IN USE. MEDICARE/MEDICAID CERTIFIED BED
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LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	
Nursing Care	351	351	261	349	228	123	265	347	Residents on 1/1/2015 Total Admissions 2015	21 41
Skilled Under 22 Intermediate DD	0	0	0	0	0	0		0 0	Total Discharges 2015	41
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	22
TOTAL BEDS	351	351	261	349	228	123	265	347		

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	12,452	12.9%	45,308	35.8%	206	3,056	22,584	0	83,606	65.3%	65.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					24	0	0	0	24	0.0%	0.0%
TOTALS	12,452	12.9%	45,308	35.8%	230	3,056	22,584	0	83,630	65.3%	65.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSING CARE		SKL UNDER 22		INTER	INTERMED. DD		SHELTERED		TOTAL	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	4	1	0	0	0	0	0	0	4	1	5
45 to 59	6	5	0	0	0	0	0	0	6	5	11
60 to 64	6	8	0	0	0	0	0	0	6	8	14
65 to 74	8	17	0	0	0	0	0	0	8	17	25
75 to 84	19	43	0	0	0	0	0	0	19	43	62
85+	25	86	0	0	0	0	0	0	25	86	111
TOTALS	68	160	0	0	0	0	0	0	68	160	228

_	IDENTS B	Y PAYMENT		AND LEVE							
LEVEL	NA - P	NA - dia - id	Other		Private	Charity	TOTALO	AVERAGE DAILY		_	
OF CARE	Medicare	Medicaid	Public I	nsurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE	
Nursing Care	31	126	1	5	65	0	228	Nursing Care	170	130	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0	
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0	
Sheltered Care			0	0	0	0	0	Shelter	0	0	
TOTALS	31	126	1	5	65	0	228				
	RESIDE	NTS BY RAC	IAL/ETHNI	CITY GRO	UPING			STAFFIN	IG		
RACE		Nursing Care	Skilled Under 22	ICF/DD	Shelter Care		otals	EMPLOYMENT CATEGORY	-	FULL-TIME EQUIVALENT	
Asian		0	0	0		0	0	Administrators		5.00	
American Indian		1	0	0		0	1	Physicians		0.00	
Black		0	0	0		0	0	Director of Nursing		4.00	
Hawaiian/Pacific I	sl.	0	0	0		0	0	Registered Nurses	2	24.00	
White		227	0	0		0	227	LPN's	3	35.00	
Race Unknown		0	0	0		0	0	Certified Aides	10	107.00	
Total		228	0	0		0	228	Other Health Staff	1	6.00	
								Non-Health Staff	8	2.00	
		Nursing	Skilled	105/00	Shelte			Totals	27	3.00	
ETHNICITY		Care	Under 22	ICF/DD	Care	9	Fotals				
Hispanic		0	0	0		0	0				
Non-Hispanic		228	0	0		0	228				
Ethnicity Unknow	n	0	0	0		0	0				
Total		228	0	0		0	228				
			N	ET REVEN	UE BY PA	YOR SO	URCE (Fiscal	Year Data)			
Medicare	N	Medicaid	Other Pu	blic Priv	ate Insurai	nce	Private Pay	Charity TOTALS Care	Charity Expense a		
37.6%		34.5%	0.	4%	3.	3%	24.2%	100.0% Expense	* Total Net	Revenue	

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
37.6%	34.5%	0.4%	3.3%	24.2%	100.0%	Expense*	Total Net Revenue	
5,734,168	5,262,094	66,192	497,774	3,692,280	15,252,508	0	0.0%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

Reported Identified Offenders

NON-PROFIT OWNERSHIP

FOR PROFIT OWNERSHIP

CONTINUING CARE COMMUNITY

LIFE CARE FACILITY

3

0

6

1

0

Total Residents Diagnosed with Mental Illness

0

Musculo-skeletal Disorders

Injuries and Poisonings

Other Medical Conditions

*Data Not Collected for 2015

Non-Medical Conditions

TOTALS

71

0

O

0

0

0

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	015
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	603 0 48 0	499 0 16 0	430 0 9 0	499 0 16 0	397 0 9 0	206 0 39 0	423	502 0 48	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	405 1,368 1,282 491
TOTAL BEDS	651	515	439	515	406	245	423	550		

FACILITY UTILIZATION - 2015

Infectious Disease w/ Isolation

Other Restrictions

No Restrictions

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Med	icare	Medic	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days (Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	32,193	20.9%	74,821	40.8%	4,206	3,259	25,945	1	140,425	63.8%	77.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			2,913	16.6%	0	0	0	0	2,913	16.6%	49.9%
Sheltered Care					0	0	0	22	22	0.0%	0.0%
TOTALS	32,193	20.9%	77,734	38.7%	4,206	3,259	25,945	23	143,360	60.3%	76.3%

RESIDENTS BY AGE GROUP. SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	0	0	0	1	0	0	0	3	0	3
45 to 59	10	16	0	0	2	1	0	0	12	17	29
60 to 64	5	9	0	0	0	2	0	0	5	11	16
65 to 74	25	41	0	0	1	1	0	0	26	42	68
75 to 84	42	77	0	0	0	1	0	0	42	78	120
85+	43	127	0	0	0	0	0	0	43	127	170
TOTALS	127	270	0	0	4	5	0	0	131	275	406

LEVEL			Other		Private	Charity		AVERAGE	DAILY P	AYMENT R	ATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CA	RE	SINGLE	DOUBLE
Nursing Care	95	212	10	7	72	1	397	Nursing Care		174	152
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under	22	0	0
ICF/DD		9	0	0	0	0	9	Intermediate	DD	140	136
Sheltered Care			0	0	0	0	0	Shelter		0	0
TOTALS	95	221	10	7	72	1	406				
	RESIDEN	ITS BY RAC	IAL/ETHN	IICITY GR	OUPING				STAFFING	i	
		Nursing	Skilled		Shelte			EMPLOYME		FULL-1	
RACE		Care	Under 22	ICF/D	D Car	e ·	Totals	CATEGOR	Y	EQUIVA	LENT
Asian		1	0	()	0	1	Administrators			6.00
American Indian		1	0	()	0	1	Physicians			0.00
Black		10	0	()	0	10	Director of Nurs	ing		6.00
Hawaiian/Pacific I	sl.	0	0	()	0	0	Registered Nurs	Registered Nurses		41.00
White		385	0	9	9	0	394	LPN's		61.00	
Race Unknown		0	0	()	0	0	Certified Aides		169.00	
Total		397	0	9	9	0	406	Other Health St	aff		28.00
								Non-Health Stat	ff	1	40.00
		Nursing	Skilled		Shelte	ered		Totals		4	51.00
ETHNICITY		Care	Under 22	lCF/E			Totals				
Hispanic		0	0	()	0	0				
Non-Hispanic		297	0	9)	0	306				
Ethnicity Unknown	า	100	0	()	0	100				
Total		397	0	()	0	406				
			ı	NET REVE	NUE BY P	AYOR SO	OURCE (Fiscal `	Year Data)			
									Charity		y Care
Medicare	M	1edicaid	Other P	ublic Pr	ivate Insura	ance	Private Pay	TOTALS	Care	Expense	
47.2%		29.4%	().3%	6	.0%	17.1%	100.0%	Expense*	Total Ne	t Revenue

						Charity	Charity Care
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of
47.2%	29.4%	0.3%	6.0%	17.1%	100.0%	Expense*	Total Net Revenue
15,799,385	9,834,322	97,289	1,992,376	5,719,680	33,443,052	729	0.0%

^{*}Charity Expense does not include expenses which may be considered a community benefit.

	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AN DISCHARGES - 20	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Decidents on 4/4/2045	0.504
Nursing Care	7,192	6,945	11,312	6,886	5,875	1,317	4636	6829	Residents on 1/1/2015	6,524
Skilled Under 22	150	150	88	0	85	65		150	Total Admissions 2015	11,443
Intermediate DD	419	421	421	421	414	5		357	Total Discharges 2015	11,105
Sheltered Care	238	171	162	169	139	99			Residents on 12/31/2015	6,862

FACILITY UTILIZATION - 2015 BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

1.486

4636

7336

6.513

TOTAL BEDS

7.999

7.687

11.983

7.476

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	care	Medi	caid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	188,896	11.2%	1,690,060	67.8%	58,983	24,823	141,662	799	2,105,223	80.2%	83.0%
Skilled Under 22			30,423	55.6%	0	0	257	0	30,680	56.0%	56.0%
Intermediate DD			149,633	114.8%	0	0	1,095	0	150,728	98.6%	98.1%
Sheltered Care					14,160	0	27,180	1,072	42,412	48.8%	68.0%
TOTALS	188,896	11.2%	1,870,116	69.8%	73,143	24,823	170,194	1,871	2,329,043	79.8%	83.0%

	NURSIN	IG CARE	SKL UNDER 22			EVEL OF CA RMED. DD	SHELTERED		TOTAL		GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	7	7	1	0	0	0	8	7	15
18 to 44	284	137	36	17	91	121	0	0	411	275	686
45 to 59	788	451	5	6	79	104	2	1	874	562	1,436
60 to 64	433	265	3	1	4	7	0	0	440	273	713
65 to 74	682	536	3	0	1	6	1	9	687	551	1,238
75 to 84	474	618	0	0	0	0	14	23	488	641	1,129
85+	314	893	0	0	0	0	22	67	336	960	1,296
TOTALS	2.975	2.900	54	31	176	238	39	100	3.244	3.269	6.513

LTC PLANNING AREA

LEVEL	DE.1110 D	Y PAYMENT	Other	- AITO LLV	Private	Charity	,		AVED A	GE DAILY PA	VMENT DA	TES
	Medicare	Medicaid		Insurance	Pay	Care	TOTALS		LEVEL OF			OUBLE
Nursing Care	555	4,788	96	114	321	1	5,875		Nursing Ca	are	267	233
Skilled Under 22	0	84	0	0	1	0	85		Skilled Und	der 22	317	317
ICF/DD		411	0	0	3	0	414		Intermedia	te DD	223	217
Sheltered Care			34	0	103	2	139		Shelter		159	120
TOTALS	555	5,283	130	114	428	3	6,513					
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	DUPING					STAFFING		
		Nursing	Skilled		Shelte				EMPLOYM		FULL-TII	
RACE		Care	Under 22	2 ICF/D	D Car	е	Totals		CATEGO	DRY	EQUIVAL	ENT
Asian		374	4	2)	0	380	_	Administrator	rs	59	9.27
American Indian		13	0	()	0	13		Physicians		7	7.54
Black		1,746	41	24	ļ	3	1,814		Director of Nursing		53.50	
Hawaiian/Pacific Is	sl.	45	8	7	•	0	60		Registered Nurses		680	0.00
White		3,447	13	379) 13	35	3,974		LPN's		488.39	
Race Unknown		250	19	2	2	1	272		Certified Aide	es	2120.05	
Total		5,875	85	414	14	12	6,513		Other Health		521	
								_	Non-Health S	Staff	1892.0	
		Nursing	Skilled		Shelte	red			Totals		5822	2.57
ETHNICITY		Care	Under 22	2 ICF/D	D Car	re .	Totals					
Hispanic		578	8	10		3	599					
Non-Hispanic		5,205	58	391	13	35	5,789					
Ethnicity Unknown	1	92	19	13		1	125					
Total		5,875	85	414	. 13	39	6,513					
			ı	NET REVE	NUE BY PA	AYOR S	OURCE (Fis	cal Year Da	ıta)			
										Charity	Charity	Care
Medicare	ľ	Medicaid	Other P	ublic Pri	vate Insura	ince	Private Pay		TOTALS	Care	Expense a	
21.5%		62.2%		1.6%	3.	.4%	11.39	6	100.0%	Expense*	Total Net F	Revenue
95,049,050	2	275,306,330	7,036,	,199	14,906,3	307	50,006,281	4	42,304,167	253,078	0.	1%

	LICENSED	BEDS, BED	S IN US	E, MEDICA	RE/MEDIC	CAID CERTIFIE	ED BEDS			
		PEAK	PEAK						ADMISSIONS AN	_
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 20	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Decidents on 4/4/2045	2.500
Nursing Care	4,173	4,072	3,785	4,066	3,610	563	2127	3470	Residents on 1/1/2015 Total Admissions 2015	3,506
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	6,522 6,490
Intermediate DD	12	12	12	12	12	0		12	Residents on 12/31/2015	3,538
Sheltered Care	49	20	15	20	13	36			_	3,330
TOTAL BEDS	4,234	4,104	3,812	4,098	3,635	599	2127	3482		

LEVEL OF CARE	Med Pat. davs	icare Occ. Pct.	Medi Pat. davs		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. davs	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	128.458	16.5%	1.025.518	81.0%	28.436	45.360	49.898	308	1.277.978	83.9%	86.0%
Skilled Under 22	120, 100	10.070	0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			4,380	100.0%	0	0	0	0	4,380	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	128,458	16.5%	1,029,898	81.0%	28,436	45,360	49,898	308	1,282,358	83.0%	85.6%

	NURSIN	IG CARE		GE GROUP, S NDER 22		RMED. DD		TERED		OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	302	117	0	0	3	1	0	0	305	118	423
45 to 59	637	300	0	0	3	3	0	0	640	303	943
60 to 64	316	169	0	0	1	0	0	1	317	170	487
65 to 74	442	287	0	0	0	0	0	0	442	287	729
75 to 84	295	298	0	0	0	1	2	2	297	301	598
85+	140	307	0	0	0	0	1	7	141	314	455
TOTALS	2.132	1.478	0	0	7	5	3	10	2.142	1.493	3.635

LEVEL		Y PAYMENT	Other		Private	Charity		AVERAG	E DAILY PA	YMENT RA	TES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF C	ARE	SINGLE [DOUBLE
Nursing Care	379	2,970	53	96	111	1	3,610	Nursing Ca	re	259	251
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	er 22	0	0
ICF/DD		0	12	0	0	0	12	Intermediat	e DD	33	33
Sheltered Care			0	0	13	0	13	Shelter		150	0
TOTALS	379	2,970	65	96	124	1	3,635				
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING				STAFFING		
		Nursing	Skilled		Shelte			EMPLOYM		FULL-TII	
RACE		Care	Under 22	ICF/DD) Car	е	Totals	CATEGO	RY	EQUIVAL	.ENT
Asian		54	0	0		0	54	Administrator	S	29	9.00
American Indian		15	0	0		0	15	Physicians			
Black		1,794	0	0		0	1,794	Director of Nursing		2	7.00
Hawaiian/Pacific I	sl.	136	0	0		0	136	Registered No	ırses	28	5.76
White		1,541	0	12	1	13	1,566	LPN's		348	8.50
Race Unknown		70	0	0		0	70	Certified Aide	S	923	3.08
Total		3,610	0	12	1	13	3,635	Other Health		282	
								Non-Health S	ап		2.47
		Nursing	Skilled		Shelte			Totals		282	1.89
ETHNICITY		Care	Under 22	2 ICF/DE) Car	re	Totals				
Hispanic		606	0	8		0	614				
Non-Hispanic		2,961	0	4		13	2,978				
Ethnicity Unknown	1	43	0	0		0	43				
Total		3,610	0	12	,	13	3,635				
			ı	NET REVEN	IUE BY P	AYOR SO	OURCE (Fiscal Y	ear Data)			
									Charity	Charity	Care
Medicare	N	/ledicaid	Other Po	ublic Priv	ate Insura	nce	Private Pay	TOTALS	Care	Expense a	as % of
9.1%		65.0%).7%	2	.5%	22.7%	100.0%	Expense*	Total Net I	Revenue
54,951,890	3	93,182,549	4,053,	399	15,121,2	263	137,548,145	604,857,246	571,363	0.	.1%

	LICENSED	BEDS, BEI	S IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	ED BEDS			
		PEAK	PEAK						ADMISSIONS AN	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 20	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D : 1 / 4/4/0045	4 000
Nursing Care	4,783	4,541	4,115	4,541	3,897	886	3718	4725	Residents on 1/1/2015	4,066
Skilled Under 22	125	125	120	125	116	9		125	Total Admissions 2015	7,040
Intermediate DD	75	75	68	75	68	7		75	Total Discharges 2015	7,363
Sheltered Care	0	248	0	248	0	0			Residents on 12/31/2015	3,743
TOTAL BEDS	4,983	4,989	4,303	4,989	4,081	902	3718	4925	_	

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	156,977	11.6%	983,520	57.0%	69,229	44,944	58,696	365	1,313,731	75.3%	79.3%
Skilled Under 22			41,853	91.7%	0	0	999	365	43,217	94.7%	94.7%
Intermediate DD			24,820	90.7%	0	0	0	0	24,820	90.7%	90.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	156,977	11.6%	1,050,193	58.4%	69,229	44,944	59,695	730	1,381,768	76.0%	75.9%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 2	015		
	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	13	14	0	0	0	0	13	14	27
18 to 44	180	81	45	30	7	9	0	0	232	120	352
45 to 59	525	327	7	5	20	17	0	0	552	349	901
60 to 64	306	168	1	1	5	5	0	0	312	174	486
65 to 74	513	428	0	0	1	2	0	0	514	430	944
75 to 84	307	360	0	0	1	1	0	0	308	361	669
85+	183	519	0	0	0	0	0	0	183	519	702
TOTALS	2,014	1,883	66	50	34	34	0	0	2,114	1,967	4,081

LEVEL		Y PAYMENT	Other		Private	Charity	/	AVERAGE DAILY	PAYMENT F	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	428	3,088	99	110	171	1	3,897	Nursing Care	202	181
Skilled Under 22	0	113	0	0	2	1	116	Skilled Under 22	301	301
ICF/DD		68	0	0	0	0	68	Intermediate DD	127	127
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	428	3,269	99	110	173	2	4,081			
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING			STAFF	ING	
		Nursing	Skilled		Shelte			EMPLOYMENT	FULL-	
RACE		Care	Under 22	ICF/DE) Car	е	Totals	CATEGORY	EQUIVA	ALENT
Asian		48	1	0		0	49	Administrators	1	14.00
American Indian		5	0	0		0	5	Physicians		37.12
Black		3,210	32	59		0	3,301	Director of Nursing	1	09.97
Hawaiian/Pacific Is	sl.	1	0	0		0	1	Registered Nurses	28	93.36
White		515	77	7		0	599	LPN's	23	04.31
Race Unknown		118	6	2		0	126	Certified Aides	59	31.33
Total		3,897	116	68		0	4,081	Other Health Staff		02.88
								Non-Health Staff	57	31.45
		Nursing	Skilled		Shelte	red		Totals	193	24.42
ETHNICITY		Care	Under 22	2 ICF/DE	O Car	e	Totals			
Hispanic		182	15	2		0	199			
Non-Hispanic		3,499	101	66		0	3,666			
Ethnicity Unknown	1	216	0	0		0	216			
Total		3,897	116	68		0	4,081			
			١	NET REVEN	NUE BY PA	AYOR S	OURCE (Fisca	l Year Data)		
								Charity		y Care
Medicare	N	Medicaid	Other P		/ate Insura		Private Pay	TOTALS Care	Expense	
28.2%		60.3%		0.4%	_	.2%	6.0%	100.0% Expens		t Revenue
85,511,460	1	82,879,274	1,175,	039	15,733,0)33	18,128,928	303,427,734 995,08	35	0.3%

*Data Not Collected for 2015

Total Residents Diagnosed with Mental Illness

TOTALS

Non-Medical Conditions

0

0

232

LICENSED REDS	REDS IN USE	MEDICARE/MEDICAID	CERTIFIED REDS

7

2

2

CONTINUING CARE COMMUNITY

Reported Identified Offenders

LIFE CARE FACILITY

		PEAK	PEAK						ADMISSIONS AN	ID .
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 2	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D '- 4/4/0045	0.074
Nursing Care	3,250	2,997	2,707	2,979	2,393	857	2865	2199	Residents on 1/1/2015	3,074
Skilled Under 22	57	57	57	57	57	0		55	Total Admissions 2015	10,351
Intermediate DD	224	228	222	224	218	6		239	Total Discharges 2015 Residents on 12/31/2015	10,586
Sheltered Care	242	228	206	228	163	79			Residents on 12/31/2015	2,839
TOTAL BEDS	3,773	3,510	3,192	3,488	2,831	942	2865	2493	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	216,410	20.7%	426,936	53.2%	3,357	44,709	199,771	1,129	892,312	75.2%	81.6%
Skilled Under 22			20,032	99.8%	0	0	0	0	20,032	96.3%	96.3%
Intermediate DD			77,280	88.6%	0	0	1,063	0	78,343	95.8%	94.1%
Sheltered Care					0	0	63,350	1,327	64,677	73.2%	77.7%
TOTALS	216,410	20.7%	524,248	57.6%	3,357	44,709	264,184	2,456	1,055,364	76.6%	82.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	6	5	0	0	0	0	6	5	11
18 to 44	3	4	19	23	30	23	0	0	52	50	102
45 to 59	38	34	0	3	50	39	1	0	89	76	165
60 to 64	37	30	0	0	15	20	0	1	52	51	103
65 to 74	108	174	1	0	10	23	2	0	121	197	318
75 to 84	188	452	0	0	1	5	5	30	194	487	681
85+	235	1,090	0	0	1	1	28	96	264	1,187	1,451
TOTALS	609	1.784	26	31	107	111	36	127	778	2.053	2.831

LTC PLANNING AREA

LEVEL			Other		Private	Charity	,		AVFR	GE DAILY PA	YMENT R	ATES
	Medicare	Medicaid		Insurance	Pay	Care	TOTALS		LEVEL OF	-		DOUBLE
Nursing Care	627	1,073	8	137	545	3	2,393		Nursing C	are	342	297
Skilled Under 22	0	57	0	0	0	0	57		Skilled Un		300	250
ICF/DD		216	0	0	2	0	218		Intermedia	ite DD	171	145
Sheltered Care			0	0	158	5	163		Shelter		183	221
TOTALS	627	1,346	8	137	705	8	2,831					
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING					STAFFING		
		Nursing	Skilled		Shelter				EMPLOY		FULL-T	
RACE		Care	Under 22	ICF/DI	O Care	;	Totals		CATEG	ORY	EQUIVA	LENT
Asian		76	1	5	2	2	84		Administrato	rs	2	25.00
American Indian		4	0	1	()	5		Physicians			0.35
Black		40	11	18	()	69		Director of N	ursing	2	23.00
Hawaiian/Pacific Is	sl.	8	0	83	()	91		Registered N	lurses	44	41.24
White		2,232	45	111	160)	2,548		LPN's		188.72	
Race Unknown		33	0	0	1	l	34		Certified Aid		109	91.49
Total		2,393	57	218	165	5	2,831		Other Health			90.56
								_	Non-Health S	Staff	94	45.53
		Nursing	Skilled		Shelter	ed			Totals		300	05.89
ETHNICITY		Care	Under 22	2 ICF/DI	D Care)	Totals					
Hispanic		55	10	9	:	2	76					
Non-Hispanic		2,305	47	209	16	1	2,722					
Ethnicity Unknown	1	33	0	0	(0	33					
Total		2,393	57	218	16:	3	2,831					
			ı	NET REVE	NUE BY PA	YOR S	OURCE (Fisc	al Year Da	ta)			
										Charity	Charity	y Care
Medicare	N	Medicaid	Other P	ublic Pri	vate Insurar	ice	Private Pay		TOTALS	Care	Expense	as % of
37.4%		30.4%	(0.2%	6.3	3%	25.6%)	100.0%	Expense*	Total Net	Revenue
116,105,637		94,305,531	737,	790	19,381,27	71	79,529,430	3	10,059,659	2,718,404	(0.9%

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	NOSIS*
		Aggressive/Anti-Social	24	DIAGNOSIS	
TOTAL FACILITIES	45	Chronic Alcoholism	27	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	31	Endocrine/Metabolic	0
FREE STANDING FACILITIES	45	Drug Addiction	31	Blood Disorders	0
		Medicaid Recipient	5	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	38	Mental Illness	14	Mental Illness	0
DD CARE BEDS ONLY	2	Non-Ambulatory	3	Developmental Disability	0
MULTI-LICENSED FACILITIES	5	Non-Mobile	3	Circulatory System	0
		Public Aid Recipient	10	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	40	Skin Disorders	0
NON-PROFIT OWNERSHIP	11	Infectious Disease w/ Isolation	3	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	34	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	1	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	6			Non-Medical Conditions	0
LIFE CARE FACILITY	7			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	109	Total Residents	Diagnose	d with Mental Illness	1,352

LICENSED DEDS	DEDG	INITIOE	MEDICARE/MEDICAID	CEDTIEIED DEDG
LICENSED DEDS.	DENO	IN USE.	MICDICARC/MICDICAID	CEKTIFIED DED3

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AT DISCHARGES - 2	
Nursing Care	6,827	6,285	5,674	6,240	5,136	1,691	5084	5559	Residents on 1/1/2015	
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	
Intermediate DD	147	147	147	147	141	6		147	Total Discharges 2015	
Sheltered Care	175	175	102	175	88	87			Residents on 12/31/2015	
TOTAL BEDS	7,149	6,607	5,923	6,562	5,365	1,784	5084	5706	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Med	licaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	258,488	13.9%	1,172,001	57.8%	20,749	58,621	378,769	14,897	1,903,525	76.4%	83.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			51,134	95.3%	0	0	0	0	51,134	95.3%	95.3%
Sheltered Care					0	0	34,959	0	34,959	54.7%	54.7%
TOTALS	258,488	13.9%	1,223,135	58.7%	20,749	58,621	413,728	14,897	1,989,618	76.2%	82.5%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSING CARE		SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	Т	OTAL	GRAND	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	111	62	0	0	24	10	0	0	135	72	207	
45 to 59	332	260	0	0	32	22	0	0	364	282	646	
60 to 64	226	158	0	0	13	3	0	0	239	161	400	
65 to 74	383	420	0	0	17	8	1	3	401	431	832	
75 to 84	386	674	0	0	5	5	8	20	399	699	1,098	
85+	472	1,649	0	0	0	2	8	48	480	1,699	2,179	
TOTALS	1.910	3.223	0	0	91	50	17	71	2.018	3.344	5.362	

LEVEL	IDENIO D	Y PAYMENT	Other	- VIAN FEA	Private	Charity		AVEDA	GE DAILY PA	VMENT D	ATEQ	
OF CARE	Medicare	Medicaid		Insurance	Pay	Charle	TOTALS	LEVEL OF (DOUBLE	
Nursing Care	638	3,191	78	188	1,019	22	5,136	Nursing Ca	are	343	241	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und	der 22	0	0	
ICF/DD		141	0	0	0	0	141	Intermedia	te DD	166	225	
Sheltered Care			0	0	88	0	88	Shelter		180	279	
TOTALS	638	3,332	78	188	1,107	22	5,365					
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GRO	UPING				STAFFING	i		
		Nursing	Skilled		Shelter			EMPLOYN		FULL-T		
RACE		Care	Under 22	! ICF/DI) Care	Э .	Totals	CATEGO	DRY	EQUIVA	LENT	
Asian		439	0	4		3	446	Administrator	rs	5	1.00	
American Indian		3	0	1		0	4	Physicians			7.08	
Black		373	0	38		1	412	Director of N	Director of Nursing		45.00	
Hawaiian/Pacific I	sl.	5	0	0		2	7	Registered Nurses		830.31		
White		4,247	0	97	8:	2	4,426	LPN's		352.17		
Race Unknown		66	0	1	(0	67	Certified Aide		1959.08		
Total		5,133	0	141	8	6	5,362	Other Health Non-Health S			4.86 4.66	
		Nursing	Skilled		Shelter			Totals		533	4.15	
ETHNICITY		Care	Under 22	2 ICF/DI	O Care	e '	Totals					
Hispanic		207	0	14		0	221					
Non-Hispanic		4,630	0	127	8	88	4,845					
Ethnicity Unknown	า	296	0	0		0	296					
Total		5,133	0	141	8	88	5,362					
			ı	NET REVE	NUE BY PA	YOR SO	OURCE (Fiscal Y	(ear Data)				
									Charity	Charity	Care	
Medicare	ľ	Medicaid	Other P	ublic Pri	vate Insurai	nce	Private Pay	TOTALS	Care	Expense	as % of	
22.3%		53.3%	(0.6%	4.	1%	19.7%	100.0%	Expense*	Total Net	Revenue	
135,500,925	3	324,036,972	3,517,	780	25,015,6	65	120,045,127	608,116,469	3,127,615	C	.5%	

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAG	NOSIS*
		Aggressive/Anti-Social	25	DIAGNOSIS	
TOTAL FACILITIES	43	Chronic Alcoholism	26	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	22	Endocrine/Metabolic	0
FREE STANDING FACILITIES	43	Drug Addiction	32	Blood Disorders	0
		Medicaid Recipient	7	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	33	Mental Illness	14	Mental Illness	0
DD CARE BEDS ONLY	7	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	3	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	4	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	42	Skin Disorders	0
NON-PROFIT OWNERSHIP	9	Infectious Disease w/ Isolation	5	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	33	Other Restrictions	2	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	7			Non-Medical Conditions	0
LIFE CARE FACILITY	6			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	60	Total Residents	s Diagnosed	l with Mental Illness	1,110

Reported Identified Offenders 60

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AN DISCHARGES - 2	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED		
Nursing Care	5,833	5,503	4,904	5,441	4,446	1,387	4500	3859	Residents on 1/1/2015	5,102
Skilled Under 22	156	147	147	147	143	13		156	Total Admissions 2015	14,767
Intermediate DD	164	164	163	164	160	4		164	Total Discharges 2015 Residents on 12/31/2015	14,726
Sheltered Care	193	313	262	313	244	-51			Residents on 12/31/2015	5,143
TOTAL BEDS	6,346	6,127	5,476	6,065	4,993	1,353	4500	4179	-	

			_	_	-						
					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Medio	caid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days (Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	315,654	19.2%	810,624	57.6%	29,135	77,377	355,245	57,637	1,645,672	77.3%	81.9%
Skilled Under 22			51,290	90.1%	394	0	326	0	52,010	91.3%	96.9%
Intermediate DD			22,909	38.3%	0	0	477	0	23,386	39.1%	39.1%
Sheltered Care					0	0	89,899	441	90,340	128.2%	79.1%
TOTALS	315,654	19.2%	884,823	58.0%	29,529	77,377	445,947	58,078	1,811,408	78.2%	81.0%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DEC	EMBER 31, 2	015		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	13	8	0	0	0	0	13	8	21
18 to 44	62	41	40	31	27	17	0	0	129	89	218
45 to 59	234	176	19	18	31	33	0	1	284	228	512
60 to 64	150	131	4	1	13	17	0	5	167	154	321
65 to 74	286	394	5	3	11	7	4	5	306	409	715
75 to 84	389	670	0	1	3	1	9	37	401	709	1,110
85+	394	1,519	0	0	0	0	40	143	434	1,662	2,096
TOTALS	1,515	2,931	81	62	85	75	53	191	1,734	3,259	4,993

LEVEL		Y PAYMENT	Other	,		Charity		AVERA	GE DAILY PA	YMENT R	ATES	
OF CARE	Medicare	Medicaid	Public I	nsurance	Pay	Care	TOTALS	LEVEL OF	CARE	SINGLE	DOUBLE	
Nursing Care	756	2,340	51	305	1,001	7	4,460	Nursing Ca	are	303	256	
Skilled Under 22	0	122	1	0	0	0	123	Skilled Un	der 22	296	286	
ICF/DD		158	0	0	2	0	160	Intermedia	ite DD	167	200	
Sheltered Care			0	0	243	1	244	Shelter		166	138	
TOTALS	756	2,620	52	305	1,246	8	4,987					
	RESIDE	NTS BY RAC	IAL/ETHNI	ICITY GRO	UPING				STAFFING			
		Nursing	Skilled		Shelter			EMPLOYN		FULL-T		
RACE		Care	Under 22	ICF/DI	O Care	•	Totals	CATEGO	DRY	EQUIVA	LENT	
Asian		142	4	6	2	2	154	Administrato	rs	4	13.75	
American Indian		8	0	0	()	8	Physicians			4.00	
Black		257	44	22	()	323	Director of Nursing		40.00		
Hawaiian/Pacific	Isl.	8	19	0	()	27	Registered Nurses		656.68		
White		3,962	69	129	242	2 .	4,402	LPN's	_		485.79	
Race Unknown		69	7	3	()	79	Certified Aide		1631.97		
Total		4,446	143	160	246	6 4	4,993	Other Health		498.34		
								Non-Health S	Staff	167	74.85	
		Nursing	Skilled		Shelter	ed		Totals		503	35.37	
ETHNICITY		Care	Under 22	ICF/DI	D Care	,	Totals					
Hispanic		154	22	7	;	2	185					
Non-Hispanic		4,260	114	137	24	2 4	4,753					
Ethnicity Unknow	'n	32	7	16	(0	55					
Total		4,446	143	160	24	4 4	4,993					
			N	ET REVE	NUE BY PA	YOR SC	URCE (Fiscal Y	ear Data)				
									Charity	Charity	/ Care	
Medicare	N	Medicaid	Other Pu		vate Insurar		Private Pay	TOTALS	Care	Expense		
34.2%		34.8%		.6%	7.1		23.2%	100.0%	Expense*	Total Net		
163,274,665	1	66,350,069	2,953,7	726	34,122,83	35	110,869,533	477,570,828	1,212,711	(0.3%	

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
		Aggressive/Anti-Social	13	DIAGNOSIS	
TOTAL FACILITIES	19	Chronic Alcoholism	8	Neoplasms	0
HOSPITAL BASED UNITS	3	Developmentally Disabled	12	Endocrine/Metabolic	0
FREE STANDING FACILITIES	16	Drug Addiction	12	Blood Disorders	0
		Medicaid Recipient	3	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	1	Alzheimer Disease	0
NURSING CARE BEDS ONLY	15	Mental Illness	6	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	3	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	3	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	2	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	16	Skin Disorders	0
NON-PROFIT OWNERSHIP	5	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	13	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	2	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	2			Non-Medical Conditions	0
LIFE CARE FACILITY	1			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	99	Total Residents	Diagnose	d with Mental Illness	319

LICENSED BEDS	BEDG	IN HIGE I	MEDICARE/MEDICAID	CEDTIEIEN BENG
LICENSED BEDS.	BEDS	IN USE. I	VIEDICARE/IVIEDICAID	CEKTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	015
Nursing Care	2,896	2,832	2,326	2,815	2,149	747	2245	2657	Residents on 1/1/2015	2,28
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	5,67
Intermediate DD	82	82	82	0	78	4		82	Total Discharges 2015	5,65
Sheltered Care	99	99	68	99	61	38			Residents on 12/31/2015	2,30
TOTAL BEDS	3,077	3,013	2,476	2,914	2,288	789	2245	2739	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	125,876	15.4%	487,905	50.3%	10,261	48,390	81,988	4,393	758,813	71.8%	73.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			28,206	94.2%	0	0	0	0	28,206	94.2%	94.2%
Sheltered Care					0	0	21,625	418	22,043	61.0%	61.0%
TOTALS	125,876	15.4%	516,111	51.6%	10,261	48,390	103,613	4,811	809,062	72.0%	73.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	42	24	0	0	10	5	0	0	52	29	81
45 to 59	163	94	0	0	21	15	0	0	184	109	293
60 to 64	119	83	0	0	6	7	0	0	125	90	215
65 to 74	233	241	0	0	3	6	0	1	236	248	484
75 to 84	216	303	0	0	2	1	7	8	225	312	537
85+	133	498	0	0	0	0	9	36	142	534	676
TOTALS	906	1.243	0	0	42	34	16	45	964	1.322	2.286

LEVEL		Y PAYMENT	Other		Private	Charity	/		AVERA	GE DAILY PA	YMENT RA	TES
	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS		LEVEL OF			OOUBLE
Nursing Care	373	1,451	40	59	217	9	2,149		Nursing Ca	are	369	290
Skilled Under 22	0	0	0	0	0	0	0		Skilled Un	der 22	0	0
ICF/DD		78	0	0	0	0	78		Intermedia	ite DD	171	171
Sheltered Care			0	0	58	3	61		Shelter		190	150
TOTALS	373	1,529	40	59	275	12	2,288					
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GRO	DUPING					STAFFING		
		Nursing	Skilled		Shelte				EMPLOYN		FULL-TII	
RACE		Care	Under 2	2 ICF/D	D Cai	re	Totals		CATEGO	ORY	EQUIVAL	ENT
Asian		25	0	1		1	27		Administrato	rs	23	3.50
American Indian		2	0	C)	0	2		Physicians		14	4.00
Black		763	0	23	3	0	786		Director of Nursing		19	9.00
Hawaiian/Pacific Is	sl.	2	0	C)	0	2		Registered Nurses		268.85	
White		1,202	0	52	2 (60	1,314		LPN's		251.58	
Race Unknown		155	0	C)	0	155		Certified Aide		836.4	
Total		2,149	0	76	6	61	2,286		Other Health			2.91 1.78
		Nursing	Skilled		Shelte	ered		_	Totals	Jian	227	
ETHNICITY		Care	Under 2	2 ICF/D			Totals					
Hispanic		286	0	10		0	296					
Non-Hispanic		1,856	0	66		61	1,983					
Ethnicity Unknown	1	7	0	0		0	7					
Total		2,149	0	76	i	61	2,286					
				NET REVE	NUE BY P	AYOR S	OURCE (Fisc	al Year Da	ıta)			
										Charity	Charity	Care
Medicare	N	Medicaid	Other F	Public Pri	vate Insura	ance	Private Pay		TOTALS	Care	Expense a	
34.9%		43.3%		0.9%	7	.1%	13.7%		100.0%	Expense*	Total Net I	Revenue
62,246,333		77,310,334	1,688	,757	12,758,	677	24,454,311	1	78,458,412	1,058,662	0.	6%

	LICENSED	BEDS, BED	S IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	D BEDS			
		PEAK	PEAK						ADMISSIONS AN	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 2	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Decidents on 4/4/0045	7 000
Nursing Care	8,625	8,201	7,294	8,027	6,602	2,023	6552	7320	Residents on 1/1/2015 Total Admissions 2015	7,200
Skilled Under 22	67	66	66	5	62	5		67	Total Discharges 2015	23,899 23,653
Intermediate DD	308	307	289	306	277	31		308	Residents on 12/31/2015	7,446
Sheltered Care	107	82	78	82	69	38			Residents on 12/31/2013	7,440
TOTAL BEDS	9,107	8,656	7,727	8,420	7,010	2,097	6552	7743		

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	450,873	18.9%	1,629,745	61.0%	51,785	134,196	195,382	3,681	2,465,662	78.3%	82.4%
Skilled Under 22			23,472	96.0%	0	0	0	0	23,472	96.0%	97.4%
Intermediate DD			101,551	90.3%	0	0	0	0	101,551	90.3%	90.6%
Sheltered Care					0	0	24,426	3,317	27,743	71.0%	92.7%
TOTALS	450,873	18.9%	1,754,768	62.1%	51,785	134,196	219,808	6,998	2,618,428	78.8%	82.9%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECE	EMBER 31, 20	015		
	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	21	20	0	0	0	0	21	20	41
18 to 44	203	96	9	12	55	44	0	0	267	152	419
45 to 59	811	457	0	0	49	57	0	0	860	514	1,374
60 to 64	466	317	0	0	18	22	0	0	484	339	823
65 to 74	560	648	0	0	8	16	0	0	568	664	1,232
75 to 84	478	898	0	0	3	4	1	7	482	909	1,391
85+	375	1,293	0	0	0	1	7	54	382	1,348	1,730
TOTALS	2,893	3,709	30	32	133	144	8	61	3,064	3,946	7,010

_	IDEN 13 B	Y PAYMENT		E AND LE			M			41/55			
LEVEL	Madiaana	Madiaaid	Other		Private		harity	TOTALO			AGE DAILY PA		
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	(Care	TOTALS) 	LEVEL OF	CARE	SINGLE [OOUBLE
Nursing Care	1,204	4,214	166	399	610		9	6,602		Nursing C	are	274	240
Skilled Under 22	0	62	0	0	0		0	62		Skilled Ur	nder 22	0	634
ICF/DD		277	0	0	0		0	277		Intermedi	ate DD	204	174
Sheltered Care			0	0	63		6	69	_	Shelter		167	0
TOTALS	1,204	4,553	166	399	673		15	7,010					
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GR	OUPING						STAFFING		
		Nursing	Skilled			ltered				EMPLOY		FULL-TII	
RACE		Care	Under 22	2 ICF/E	DD C	are	٦	Γotals		CATEG	ORY	EQUIVAL	ENT.
Asian		38	0		2	0		40	_	Administrato	ors	60	6.02
American Indian		3	0		5	0		8		Physicians		52	2.00
Black		2,673	44	6	4	0	:	2,781		Director of N	Nursing	6	7.00
Hawaiian/Pacific I	sl.	3	0		4	0		7		Registered Nurses		67	5.19
White		3,804	9	19	9	69	4	4,081		LPN's		856	3.02
Race Unknown		81	9		3	0		93		Certified Aid		2332	
Total		6,602	62	27	7	69	-	7,010		Other Health		767 1957	7.18 7.50
ETHNICITY		Nursing Care	Skilled Under 22	2 ICF/[Itered		Totals	-	Totals	<u> </u>	6773	
Hispanic		285	8		8	0		301					
Non-Hispanic		5,716	53	26	-	69	(6,107					
Ethnicity Unknow	n	601	1	-	0	0	·	602					
Total		6,602	62	27	7	69	-	7,010					
			l	NET REV	NUE BY	PAYO	OR SC	URCE (Fis	scal Year Da	ata)			
											Charity	Charity	Care
Medicare	ľ	Medicaid	Other P	ublic P	rivate Insu	ırance	е	Private Pa	ıy	TOTALS	Care	Expense a	ıs % of
40.0%		46.0%		1.1%		6.8%	, 0	6.2	2%	100.0%	Expense*	Total Net I	Revenue
387,942,180	4	147,034,395	10,627	,600	65,581	1,353		59,745,76	88 9	970,931,296	########	1.	.3%

HEALTH SERVICE AREA	008	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
	000	Aggressive/Anti-Social	18	DIAGNOSIS	00.0
TOTAL FACILITIES	30	Chronic Alcoholism	18	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	11	Endocrine/Metabolic	0
FREE STANDING FACILITIES	30	Drug Addiction	22	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	22	Mental Illness	13	Mental Illness	0
DD CARE BEDS ONLY	7	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	3	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	30	Skin Disorders	0
NON-PROFIT OWNERSHIP	14	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	16	Other Restrictions	4	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	4			Non-Medical Conditions	0
LIFE CARE FACILITY	2			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	48	Total Resident	s Diagnosed	with Mental Illness	337

	LICENSED	BEDS, BEI	DS IN US	E, MEDICA	RE/MEDIC	CAID CERTIFIE	D BEDS			
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS ANI DISCHARGES - 20	_
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents on 4/4/0045	0.400
Nursing Care	2,504	2,463	2,218	2,403	1,981	523	1712	1835	Residents on 1/1/2015 Total Admissions 2015	2,183 5,555
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	5,576
Intermediate DD	112	112	112	112	109	3		80	Residents on 12/31/2015	2,162
Sheltered Care	103	103	66	103	66	37			-	2,102
TOTAL BEDS	2,719	2,678	2,396	2,618	2,156	563	1712	1915		

	Med	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	106,876	17.1%	424,616	63.4%	15,225	23,333	133,992	799	704,841	77.1%	78.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			34,378	117.7%	0	0	365	0	34,743	85.0%	85.0%
Sheltered Care					0	0	37,595	0	37,595	100.0%	100.0%
TOTALS	106,876	17.1%	458,994	65.7%	15,225	23,333	171,952	799	777,179	78.3%	79.5%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	26	14	0	0	33	32	0	0	59	46	105
45 to 59	136	96	0	0	13	28	2	0	151	124	275
60 to 64	84	88	0	0	1	2	5	3	90	93	183
65 to 74	127	188	0	0	0	0	5	3	132	191	323
75 to 84	160	337	0	0	0	0	4	10	164	347	511
85+	136	589	0	0	0	0	6	28	142	617	759
TOTALS	669	1.312	0	0	47	62	22	44	738	1.418	2.156

RE:	SIDENTS B	Y PAYMENT	SOURC	E AND LEVE	EL OF CA	RE				
LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS	AVERAGE DAILY LEVEL OF CARE	PAYMENT F SINGLE	RATES DOUBLE
Nursing Care	302	1,198	74	60	343	4	1,981	Nursing Care	291	223
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		108	0	0	1	0	109	Intermediate DD	212	244
Sheltered Care			0	0	66	0	66	Shelter	42	0
TOTALS	302	1,306	74	60	410	4	2,156			
	RESIDEN	ITS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFF	ING	
DACE		Nursing Care	Skilled Under 2		Shelte Car		Totals	EMPLOYMENT CATEGORY	FULL- EQUIV	

RES	IDENTS BY RA	CIAL/ETHNIC		STAFFING		
RACE	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	EMPLOYMENT FULL-TIME CATEGORY EQUIVALENT
Asian	42	0	8	0	50	Administrators 25.90
American Indian	2	0	0	0	2	Physicians 38.38
Black	133	0	13	1	147	Director of Nursing 26.50
Hawaiian/Pacific Isl.	3	0	11	0	14	Registered Nurses 329.94
White	1,770	0	77	65	1,912	LPN's 165.67
Race Unknown	31	0	0	0	31	Certified Aides 850.54
Total	1,981	0	109	67	2,156	Other Health Staff 165.55
						Non-Health Staff 747.75
	Nursing	Skilled		Sheltered		Totals 2350.23
ETHNICITY	Care	Under 22	ICF/DD	Care	Totals	
Hispanic	113	0	5	1	119	
Non-Hispanic	1,688	0	104	65	1,857	
Ethnicity Unknown	180	0	0	0	180	
Total	1,981	0	109	66	2,156	

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
31.0%	45.2%	1.0%	5.2%	17.7%	100.0%	Expense*	Total Net Revenue	
53,979,042	78,617,093	1,691,284	9,015,050	30,751,900	174,054,369	84,099	0.0%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

NON-PROFIT OWNERSHIP 12 Infectious Disease w/ Isolation 10 Musculo-skeletal Disorders FOR PROFIT OWNERSHIP 23 Other Restrictions Injuries and Poisonings 3 Other Medical Conditions No Restrictions n **CONTINUING CARE COMMUNITY** Non-Medical Conditions 4 **TOTALS** LIFE CARE FACILITY 4

Reported Identified Offenders 69 Total Residents

LICENSED BEDS, BEDS, IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

784

*Data Not Collected for 2015

Total Residents Diagnosed with Mental Illness

0

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0

0

0

	LICENSED	DLD3, DLI) IN 03	L, WILDICA	AINE/IVIEDI	CAID CLIVIII IL	D BLD3			
		PEAK	PEAK						ADMISSIONS AN	I D
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 2	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D '- 4 /4 /004 F	0.400
Nursing Care	4,497	4,267	3,602	4,216	3,224	1,273	3077	3377	Residents on 1/1/2015 Total Admissions 2015	3,499
Skilled Under 22	0	0	0	0	0	0		0		12,077
Intermediate DD	290	290	278	290	273	17		293	Total Discharges 2015 Residents on 12/31/2015	12,259 3,317
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	3,317
TOTAL BEDS	4,787	4,557	3,880	4,506	3,497	1,290	3077	3670		

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	210,361	18.7%	624,323	50.7%	41,368	56,544	218,719	1,513	1,152,828	70.2%	74.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			90,678	84.8%	0	0	769	0	91,447	86.4%	86.4%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	210,361	18.7%	715,001	53.4%	41,368	56,544	219,488	1,513	1,244,275	71.2%	74.8%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	015		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	77	41	0	0	16	52	0	0	93	93	186
45 to 59	255	168	0	0	33	83	0	0	288	251	539
60 to 64	110	109	0	0	8	24	0	0	118	133	251
65 to 74	232	281	0	0	12	20	0	0	244	301	545
75 to 84	283	504	0	0	7	11	0	0	290	515	805
85+	298	866	0	0	0	7	0	0	298	873	1,171
TOTALS	1,255	1,969	0	0	76	197	0	0	1,331	2,166	3,497

RES	SIDENTS BY	PAYMENT	SOURC	E AND LEVI	EL OF CA	RE				
LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT F	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	621	1,912	13	122	553	3	3,224	Nursing Care	312	243
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		270	0	0	3	0	273	Intermediate DD	153	174
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	621	2,182	13	122	556	3	3,497			

RES	IDENTS BY RA	CIAL/ETHNIC	ITY GROU		STAFFING				
RACE	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT		
Asian	91	0	5	0	96	Administrators	35.86		
American Indian	5	0	2	0	7	Physicians	6.40		
Black	338	0	19	0	357	Director of Nursing	32.25		
Hawaiian/Pacific Isl.	4	0	0	0	4	Registered Nurses	533.07		
White	2,601	0	247	0	2,848	LPN's	292.09		
Race Unknown	185	0	0	0	185	Certified Aides	1375.93		
Total	3,224	0	273	0	3,497	Other Health Staff	418.76		
						Non-Health Staff	1395.99		
	Nursing	Skilled		Sheltered		Totals	4090.35		
ETHNICITY	Care	Under 22	ICF/DD	Care	Totals				
Hispanic	153	0	7	0	160				
Non-Hispanic	2,913	0	266	0	3,179				
Ethnicity Unknown	158	0	0	0	158				
Total	3,224	0	273	0	3,497				

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
36.8%	37.1%	0.8%	8.5%	16.8%	100.0%	Expense*	Total Net Revenue	
115,122,093	116,114,821	2,367,431	26,555,126	52,470,945	312,630,416	551,962	0.2%	

^{*}Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	008	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
		Aggressive/Anti-Social	8	DIAGNOSIS	
TOTAL FACILITIES	10	Chronic Alcoholism	5	Neoplasms	0
HOSPITAL BASED UNITS	1	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	9	Drug Addiction	7	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	8	Mental Illness	4	Mental Illness	0
DD CARE BEDS ONLY	1	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	7	Skin Disorders	0
NON-PROFIT OWNERSHIP	3	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	6	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	

LICENSED REDS REDS IN USE MEDICARE/MEDICAID CERTIFIED REDS							
	•	E/MEDICAID CEDTIFIED DEDG	MEDICADE	INI HE	DEDG	LICENICED DEDC	

Reported Identified Offenders

		PEAK	PEAK						ADMISSIONS AN	ID
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 20	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D '- 4 /4 /004 F	700
Nursing Care	997	978	728	977	654	343	903	824	Residents on 1/1/2015	799
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	2,504
Intermediate DD	96	96	90	96	89	7		94	Total Discharges 2015	2,516
Sheltered Care	63	63	46	63	46	17			Residents on 12/31/2015	787
TOTAL BEDS	1,156	1,137	864	1,136	789	367	903	918	=	

Total Residents Diagnosed with Mental Illness

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medicare Medicaid		icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up	
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Occ. Pct.				
Nursing Care	51,608	15.7%	111,340	37.0%	16,745	8,313	50,983	53	239,042	65.7%	67.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			30,930	90.1%	332	0	395	0	31,657	90.3%	90.3%
Sheltered Care					0	0	14,806	2,040	16,846	73.3%	73.3%
TOTALS	51,608	15.7%	142,270	42.5%	17,077	8,313	66,184	2,093	287,545	68.1%	69.3%

	NURSIN	IG CARE	SKL UNDER 22		INTER	INTERMED. DD		SHELTERED		TOTAL	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	2	0	0	8	11	0	0	10	13	23
45 to 59	11	9	0	0	21	13	0	0	32	22	54
60 to 64	7	13	0	0	9	9	0	1	16	23	39
65 to 74	50	46	0	0	7	4	1	2	58	52	110
75 to 84	82	111	0	0	3	2	2	9	87	122	209
85+	73	248	0	0	2	0	8	23	83	271	354
TOTALS	225	429	0	0	50	39	11	35	286	503	789

176

28,928,373

23,007,500

2,880,871

*Charity Expense does not include expenses which may be considered a community benefit.

RES	IDENTS B	Y PAYMENT	Other	AND LEVE	L OF CAF Private			AVERAGE	DAILY BAY	ARAENIT F	ATEC	
OF CARE	Medicare	Medicaid		nsurance	Private	Charity Care	TOTALS	AVERAGE LEVEL OF CAR		YMENIF SINGLE	DOUBLE	
									\ _			
Nursing Care	137	317	61	12	127	0	654	Nursing Care		291	235	
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 2		0	0	
ICF/DD		86	0	0	3	0	89	Intermediate D	טט	135	135	
Sheltered Care			0	0	42	4	46	Shelter		256	222	
TOTALS	137	403	61	12	172	4	789					
	RESIDEN	ITS BY RAC	IAL/ETHNI	CITY GRO	JPING			:	STAFFING			
		Nursing	Skilled		Sheltered EMPLOYMENT		-	FULL-	· · · · · · —			
RACE		Care	Under 22	ICF/DD	Care	е .	Totals	CATEGORY		EQUIVALENT		
Asian		2	0	0		0	2	Administrators		12.50		
American Indian		0	0	0		0	0	Physicians			0.00	
Black		2	0	6		0	8	Director of Nursing			9.96	
Hawaiian/Pacific I	sl.	0	0	0		0	0	Registered Nurses		1	08.59	
White		629	0	83	4	3	755	LPN's			60.31	
Race Unknown		21	0	0		3	24	Certified Aides		331.02		
Total		654	0	89	4	6	789	Other Health Sta	ff	55.78		
								Non-Health Staff		2	216.31	
		Nursing	Skilled		Shelte	red		Totals		7	94.47	
ETHNICITY		Care	Under 22	ICF/DD	Car		Totals					
Hispanic		22	0	5		0	27					
Non-Hispanic		583	0	84	4	16	713					
Ethnicity Unknown	า	49	0	0		0	49					
Total		654	0	89	4	16	789					
			N	ET REVEN	UE BY PA	YOR SO	OURCE (Fiscal Y	ear Data)				
									Charity	Chari	ty Care	
Medicare	I.	Medicaid	Other Pu	blic Priva	ate Insura	nce	Private Pay	TOTALS	Care		nse as % of	
40.5%	.,	32.2%		.0%		9%	19.4%		Expense*	•	Net Revenue	

2,799,620

13,891,623

71,507,987

54,709

0.1%

Reported Identified Offenders 0 Total Residents Diagnosed with Mental Illness 3

Other Medical Conditions

*Data Not Collected for 2015

Non-Medical Conditions

TOTALS

0

0

0

LICENSED BEDS, BEI	D3 IN U3E, MEDICARE/MEDICAID CERTIFIED BED3	
PEAK	PEAK	

LICENSED DEDG DEDG IN LIGE MEDICADE/MEDICAD CERTIFIED DEDG

No Restrictions

0

1

CONTINUING CARE COMMUNITY

LIFE CARE FACILITY

		PEAK	PEAK						ADMISSIONS AND	
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 201	5
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	5 11 1 1/1/2215	
Nursing Care	265	265	228	265	191	74	126	241	Residents on 1/1/2015	185
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	492
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015 Residents on 12/31/2015	486
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	191
TOTAL BEDS	265	265	228	265	191	74	126	241	_	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medi Pat. days	care Occ. Pct.	Medi Pat. days		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	12,267	26.7%	31,238	35.5%	0	776	23,863	0	68,144	70.5%	70.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	12,267	26.7%	31,238	35.5%	0	776	23,863	0	68,144	70.5%	70.5%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	0	0	0	0	0	1	1
45 to 59	5	4	0	0	0	0	0	0	5	4	9
60 to 64	6	3	0	0	0	0	0	0	6	3	9
65 to 74	4	12	0	0	0	0	0	0	4	12	16
75 to 84	20	44	0	0	0	0	0	0	20	44	64
85+	19	73	0	0	0	0	0	0	19	73	92
TOTALS	54	137	0	0	0	0	0	0	54	137	191

LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT I	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	35	89	1	0	66	0	191	Nursing Care	195	173
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	35	89	1	0	66	0	191			
	RESIDEN	ITS BY RAC	IAL/ETHI	NICITY GRO	DUPING			STAFF	ING	
		Nursing	Skilled		Shelte			EMPLOYMENT	FULL-	
RACE		Care	Under 22	2 ICF/DI	D Car	e .	Totals	CATEGORY	EQUIV	ALENT
Asian		0	0	C)	0	0	Administrators		2.00
American Indian		0	0	C)	0	0	Physicians		0.00
Black		0	0	C)	0	0	Director of Nursing		2.00
Hawaiian/Pacific I	sl.	0	0	C)	0	0	Registered Nurses		29.00
White		191	0	C)	0	191	LPN's		24.00
Race Unknown		0	0	C)	0	0	Certified Aides		84.00
Total		191	0	C)	0	191	Other Health Staff		18.00
								Non-Health Staff		88.00
		Nursing	Skilled		Shelte	ered		Totals	2	247.00
ETHNICITY		Care	Under 2	2 ICF/D	D Ca	re	Totals			
Hispanic		2	0	0		0	2			
Non-Hispanic		189	0	0		0	189			
Ethnicity Unknown	า	0	0	0		0	0			
Total		191	0	0		0	191			
				NET REVE	NUE BY P	AYOR SO	OURCE (Fiscal '	Year Data)		
								Charity	, Chari	ty Care
Modicaro		Modicaid	Othor B	ublia Dei	voto Incur		Drivata Day	TOTALS Care	F	200 % of

						Charity	Charity Care	
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of	
35.2%	28.5%	4.6%	0.6%	31.2%	100.0%	Expense*	Total Net Revenue	
4,574,118	3,700,796	598,481	75,100	4,056,217	13,004,712	0	0.0%	

 $^{^{\}star}$ Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
		Aggressive/Anti-Social	16	DIAGNOSIS	00.0
TOTAL FACILITIES	20	Chronic Alcoholism	14	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	6	Endocrine/Metabolic	0
FREE STANDING FACILITIES	20	Drug Addiction	16	Blood Disorders	0
		Medicaid Recipient	1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	9	Alzheimer Disease	0
NURSING CARE BEDS ONLY	8	Mental Illness	2	Mental Illness	0
DD CARE BEDS ONLY	11	Non-Ambulatory	1	Developmental Disability	0
MULTI-LICENSED FACILITIES	1	Non-Mobile	2	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	20	Skin Disorders	0
NON-PROFIT OWNERSHIP	14	Infectious Disease w/ Isolation	11	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	5	Other Restrictions	0	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	1			Non-Medical Conditions	0
LIFE CARE FACILITY	2			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	33	Total Residents	s Diagnosed	with Mental Illness	530

	LICENSED	BEDS, BE	DS IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	D BEDS			
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	015
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	1,368 0 112 40	1,320 0 112 40	1,200 0 105 40	1,320 0 112 40	1,027 0 102 38	341 0 10 2	676	810 0 112	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	1,170 1,930 1,933 1,167
TOTAL BEDS	1,520	1,472	1,345	1,472	1,167	353	676	922	=	

LEVEL OF CARE	Medi Pat. days	care Occ. Pct.	Medic Pat. days		Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
Nursing Care	46,443	18.8%	188,841	63.9%	1,925	4,530	138,372	1	380,112	76.1%	78.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			36,535	89.4%	0	0	0	0	36,535	89.4%	89.4%
Sheltered Care					0	0	13,723	0	13,723	94.0%	94.0%
TOTALS	46,443	18.8%	225,376	67.0%	1,925	4,530	152,095	1	430,370	77.6%	80.1%

	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015											
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	39	20	0	0	14	7	0	0	53	27	80	
45 to 59	87	60	0	0	27	15	0	0	114	75	189	
60 to 64	36	24	0	0	15	4	0	0	51	28	79	
65 to 74	110	69	0	0	12	5	1	1	123	75	198	
75 to 84	108	103	0	0	2	0	0	2	110	105	215	
85+	200	171	0	0	0	1	9	25	209	197	406	
TOTALS	580	447	0	0	70	32	10	28	660	507	1,167	

LEVEL		Y PAYMENT	Other		Private	Charity			GE DAILY PA		_
OF CARE	Medicare	Medicaid	Public I	nsurance	Pay	Care	TOTALS	LEVEL OF C	CARE	SINGLE [OOUBLE
Nursing Care	126	477	3	26	395	0	1,027	Nursing Ca	re	195	188
Skilled Under 22	0	0	0	0	0	0	0	Skilled Und		0	0
ICF/DD		102	0	0	0	0	102	Intermediat	e DD	140	172
Sheltered Care			0	0	38	0	38	Shelter		145	145
TOTALS	126	579	3	26	433	0	1,167				
	RESIDE	NTS BY RAC	IAL/ETHNI	CITY GRO	UPING				STAFFING		
		Nursing	Skilled		Shelter			EMPLOYM		FULL-TII	
RACE		Care	Under 22	ICF/DD	Care	•	Γotals	CATEGO	RY	EQUIVAL	ENT.
Asian		4	0	0	()	4	Administrator	S	10	0.47
American Indian		1	0	1	()	2	Physicians		į	5.00
Black		144	0	21	()	165	Director of Nursing		(9.00
Hawaiian/Pacific	Isl.	0	0	0	()	0	Registered Nurses		144	4.97
White		592	0	80	38	3	710	LPN's		113	3.30
Race Unknown		286	0	0	()	286	Certified Aide	~	481.90	
Total		1,027	0	102	38	3	1,167	Other Health		103.12	
								Non-Health S	taff	300	0.20
		Nursing	Skilled		Shelter	ed		Totals		1167	7.96
ETHNICITY		Care	Under 22	ICF/DD	Care	•	Totals				
Hispanic		16	0	6		0	22				
Non-Hispanic		1,011	0	96	3	8	1,145				
Ethnicity Unknow	'n	0	0	0		0	0				
Total		1,027	0	102	3	8	1,167				
			N	ET REVEN	IUE BY PA	YOR SC	URCE (Fiscal Ye	ear Data)			
									Charity	Charity	
Medicare	N	/ledicaid	Other Pu		ate Insurar		Private Pay	TOTALS	Care	Expense a	
25.7%		36.2%		.7%		1%	28.3%	100.0%	Expense*	Total Net F	
20,918,977		29,514,149	5,474,5	577	2,512,9	90	23,055,284	81,475,977	202	0.	.0%

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	2	DIAGNOSIS	
TOTAL FACILITIES	2	Chronic Alcoholism	2	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	2	Endocrine/Metabolic	0
FREE STANDING FACILITIES	2	Drug Addiction	2	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	2	Skin Disorders	0
NON-PROFIT OWNERSHIP	0	Infectious Disease w/ Isolation	0	Musculo-skeletal Disorders	0

Reported Identified Offenders

FOR PROFIT OWNERSHIP

CONTINUING CARE COMMUNITY

LIFE CARE FACILITY

Other Restrictions

No Restrictions

Total Residents Diagnosed with Mental Illness

0

Injuries and Poisonings

Other Medical Conditions

*Data Not Collected for 2015

Non-Medical Conditions

TOTALS

11

0

0

0

0

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS
--

2

1

0

0

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	_
Nursing Care Skilled Under 22 Intermediate DD Sheltered Care	185 0 0 0	171 0 0	159 0 0	171 0 0 0	127 0 0	58 0 0 0	169	66 0 0	Residents on 1/1/2015 Total Admissions 2015 Total Discharges 2015 Residents on 12/31/2015	143 1,011 989 165
TOTAL BEDS	185	171	159	171	127	58	169	66	=	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

		icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	19,258	31.2%	8,379	34.8%	1,368	6,323	14,299	0	49,627	73.5%	79.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	19,258	31.2%	8,379	34.8%	1,368	6,323	14,299	0	49,627	73.5%	79.5%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND	
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	0	0	0	0	0	0	0	0	0	0	0	
45 to 59	1	4	0	0	0	0	0	0	1	4	5	
60 to 64	0	2	0	0	0	0	0	0	0	2	2	
65 to 74	6	18	0	0	0	0	0	0	6	18	24	
75 to 84	12	20	0	0	0	0	0	0	12	20	32	
85+	11	53	0	0	0	0	0	0	11	53	64	
TOTALS	30	97	0	0	0	0	0	0	30	97	127	

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Priva e Pa		Charity Care		TALS	AVERA LEVEL OF (GE DAILY PA		ATES DOUBLE	
Nursing Care	49	19	14	12	3		0		127	Nursing Ca		292	233	
Skilled Under 22	0	0	0	0	_	0	0		0	Skilled Und		0	0	
ICF/DD	Ü	0	0	0		0	0		0	Intermedia		0	0	
Sheltered Care		· ·	0	0		0	0		0	Shelter	.0 22	0	0	
TOTALS	49	19	14	12	3	3	0		127					
	RESIDE	NTS BY RAC	IAL/ETH	NICITY GI	ROUPIN	G					STAFFING	i		
		Nursing	Skilled		_	helter				EMPLOYN		FULL-TI		
RACE		Care	Under 2	2 ICF/	DD	Care)	Totals		CATEGO	DRY	EQUIVAL	ENT	
Asian		0	0		0	(0	0	_	Administrator	'S		2.00	
American Indian		0	0		0	(0	0		Physicians			0.00	
Black		3	0		0	(0	3		Director of N	ursing		2.00	
Hawaiian/Pacific I	sl.	0	0		0	(0	0		Registered Nurses		3	6.17	
White		120	0		0	(0	120		LPN's			8.10	
Race Unknown		4	0		0	(0	4		Certified Aide	Certified Aides		57.40	
Total		127	0)	0	(0	127		Other Health	Staff	0.00		
										Non-Health S	Staff	52.60		
		Nursing	Skilled		S	helter	ed			Totals		15	8.27	
ETHNICITY		Care	Under 2	2 ICF/		Care		Totals						
Hispanic		4	0		0		0	4						
Non-Hispanic		123	0)	0		0	123						
Ethnicity Unknow	า	0	0)	0		0	0						
Total		127	0)	0		0	127						
				NET REV	ENUE B	Y PA	YOR S	OURC	E (Fiscal Y	ear Data)				
											Charity	Charity	Care	
Medicare	N	Medicaid	Other F	Public F	Private In	surar	nce	Priva	te Pay	TOTALS	Care	Expense a	as % of	
39.8%		20.0%		3.6%		12.4	4%		24.2%	100.0%	Expense*	Total Net	Revenue	
2,034,337		1,025,352	184	1,000	F	32,4°	78	1.2	39,188	5,115,355	0	0	.0%	

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGN	OSIS*
TILALITI SERVICE AREA	009	Aggressive/Anti-Social	12	DIAGNOSIS	0010
TOTAL FACILITIES	25	Chronic Alcoholism	14	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	10	Endocrine/Metabolic	0
FREE STANDING FACILITIES	25	Drug Addiction	18	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	3	Alzheimer Disease	0
NURSING CARE BEDS ONLY	18	Mental Illness	6	Mental Illness	0
DD CARE BEDS ONLY	7	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	3	Circulatory System	0
		Public Aid Recipient	3	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	1	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	1	Ventilator Dependent	20	Skin Disorders	0
NON-PROFIT OWNERSHIP	8	Infectious Disease w/ Isolation	7	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	16	Other Restrictions	2	Injuries and Poisonings	0
		No Restrictions	2	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	3			Non-Medical Conditions	0
LIFE CARE FACILITY	5			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	76	Total Resident	ts Diagnosed	with Mental Illness	563

	LICENSED	BEDS, BEI	S IN US	E, MEDICA	RE/MEDI	CAID CERTIFIE	D BEDS			
		PEAK	PEAK						ADMISSIONS AN	ID
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 20	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	Desidents on 4/4/0045	0.007
Nursing Care	2,715	2,680	2,363	2,658	2,122	593	2075	2323	Residents on 1/1/2015	2,267
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015 Total Discharges 2015	5,545 5,481
Intermediate DD	112	112	106	112	104	8		112	Residents on 12/31/2015	2,331
Sheltered Care	0	56	48	56	43	-43			Residents on 12/31/2013	2,331
TOTAL BEDS	2,827	2,848	2,517	2,826	2,269	558	2075	2435		

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Med	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	144,152	19.0%	487,459	57.5%	5,190	23,239	115,965	150	776,155	78.3%	79.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			37,437	91.6%	496	0	0	0	37,933	92.8%	92.8%
Sheltered Care					0	0	14,541	31	14,572	0.0%	71.3%
TOTALS	144,152	19.0%	524,896	59.1%	5,686	23,239	130,506	181	828,660	80.3%	79.7%

		RESIDE	ENTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEL	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	22	25	0	0	18	14	0	0	40	39	79
45 to 59	130	89	0	0	34	17	0	0	164	106	270
60 to 64	73	74	0	0	4	8	0	0	77	82	159
65 to 74	139	196	0	0	5	1	0	0	144	197	341
75 to 84	192	402	0	0	1	1	5	10	198	413	611
85+	165	615	0	0	0	1	3	25	168	641	809
TOTALS	721	1,401	0	0	62	42	8	35	791	1,478	2,269

OF CARE Medicare Medicaid Public Insurance Pay Care TOTALS LEVEL OF CARE SINGLE DOUBLE Nursing Care 402 1,314 15 50 337 2 2,120 Nursing Care 255 205 Skilled Under 22 0 </th <th>LEVEL</th> <th></th> <th></th> <th>Other</th> <th></th> <th>Priva</th> <th>te (</th> <th>Charity</th> <th></th> <th></th> <th>AVFRA</th> <th>GE DAILY PA</th> <th>YMENT RA</th> <th>TES</th>	LEVEL			Other		Priva	te (Charity			AVFRA	GE DAILY PA	YMENT RA	TES
Skilled Under 22	OF CARE	Medicare	Medicaid		Insurance			•	TOTAL	_S		-		_
CF/DD	Nursing Care	402	1,314	15	50	337	•	2	2,12	0	Nursing Ca	are	255	205
Sheltered Care	Skilled Under 22	0	0	0	0	0)	0		0	Skilled Un	der 22	0	0
RACE Nursing Skilled 1,1418 15 50 379 3 2,267 Sheltered Care Under 22 ICF/DD Care Totals EMPLOYMENT EQUIVALENT	ICF/DD		104	0	0	0)	0	10	4	Intermedia	ite DD	175	203
RACE Nursing Skilled Under 22 CF/DD Care Totals Care Care Under 22 CF/DD Care Totals Care Care	Sheltered Care			0	0	42		1	4	3	Shelter		155	190
RACE Nursing Care Skilled Under 22 ICF/DD Care Totals EMPLOYMENT CATEGORY FULL-TIME EQUIVALENT Asian 25 0 0 0 25 Administrators 25.00 American Indian 1 0 1 0 2 Physicians 13.00 Black 337 0 21 0 358 Director of Nursing 18.00 Hawaiian/Pacific Isl. 1 0 1 0 2 Registered Nurses 281.01 White 1,634 0 79 43 1,756 LPN's 278.50 Race Unknown 124 0 2 0 126 Certified Aides 945.94 Total 2,122 0 104 43 2,269 Other Health Staff 174.03 Non-Heispanic 78 0 3 0 81 Non-Hispanic 1,897 0 101 43 2,041 Ethnicity Unknown 147 0	TOTALS	402	1,418	15	50	379)	3	2,26	7				
RACE Care Under 22 ICF/DD Care Totals CATEGORY EQUIVALENT Asian 25 0 0 0 25 Administrators 25.00 American Indian 1 0 1 0 2 Physicians 13.00 Black 337 0 21 0 358 Director of Nursing 18.00 Hawaiian/Pacific Isl. 1 0 1 0 2 Registered Nurses 281.01 White 1,634 0 79 43 1,756 LPN's 278.50 Race Unknown 124 0 2 0 126 Certified Aides 945.94 Total 2,122 0 104 43 2,269 Other Health Staff 174.03 Non-Heigheit 1,897 0 101 43 2,041 Totals 2723.62 Ethnicity Unknown 147 0 0 0 147 2 Care Charity		RESIDEN	NTS BY RAC	IAL/ETH	NICITY GR	OUPING	;					STAFFING	i	
Asian 25 0 0 0 0 25 Administrators 25.00 American Indian 1 0 0 1 0 25 Black 337 0 21 0 358 Hawaiian/Pacific Isl. 1 0 1 0 2 Hawaiian/Pacific Isl. 1 0 1 0 2 Registered Nurses 281.01 White 1,634 0 79 43 1,756 Race Unknown 124 0 2 0 126 Total 2,122 0 104 43 2,269 Nursing Skilled Under 22 ICF/DD Care Totals Hispanic 78 0 3 0 81 Non-Hispanic 1,897 0 101 43 2,041 Ethnicity Unknown 147 0 0 0 0 147 Total 2,122 0 104 43 2,269 Hispanic 78 0 3 0 81 Non-Hispanic 1,897 0 101 43 2,041 Ethnicity Unknown 147 0 0 0 0 147 Total 2,122 0 104 43 2,269 Medicare Medicaid Other Public Private Insurance Private Pay Medicare Medicaid Other Public Private Insurance Private Pay Medicare Sheet Care Expense as % of 39.3% 0.7% 6.9% 13.7% 100.0% Expense* Total Net Revenue						_							-	
American Indian 1 0 1 0 2 Physicians 13.00 Black 337 0 21 0 358 Director of Nursing 18.00 Hawaiian/Pacific Isl. 1 0 1 0 2 Registered Nurses 281.01 White 1,634 0 79 43 1,756 LPN's 278.50 Race Unknown 124 0 2 0 126 Certified Aides 945.94 Total 2,122 0 104 43 2,269 Other Health Staff 988.14 Non-Health Staff 988.14 174.03 Non-Health Staff 988.14 Hispanic 78 0 3 0 81 Non-Hispanic 1,897 0 0 147 0 147 Total 2,122 0 104 43 2,269 147 Total 2,122 0 104 43 2,269 147	RACE		Care	Under 2	2 ICF/D	D	Care	_	Γotals		CATEGO	ORY	EQUIVAL	ENT.
Black 337	Asian		25	0		0	0		25		Administrato	rs	2	5.00
Hawaiian/Pacific Isl. 1 0 1 0 2 Registered Nurses 281.01 White 1,634 0 79 43 1,756 LPN's 278.50 Race Unknown 124 0 2 0 126 Certified Aides 945.94 Total 2,122 0 104 43 2,269 Other Health Staff 174.03 Non-Health Staff 10 Sheltered Non-Health Staff 988.14 988.14 Hispanic 78 0 3 0 81 Non-Health Staff 988.14 Non-Hispanic 1,897 0 101 43 2,041 200 147 Ethnicity Unknown 147 0 0 0 147 0 147 0 147 0 0 147 0 147 0 147 0 147 0 147 0 147 0 147 0 147 0 147 0 147	American Indian		1	0		1	0		2		Physicians		1;	3.00
White Race Unknown 1,634 0 79 43 1,756 LPN's Certified Aides 278.50 P45.94 P45.	Black		337	0	2	1	0		358		Director of N	ursing	18	8.00
Race Unknown 124 0 2 0 126 Certified Aides Other Health Staff (174.03) Non-Health Staff (174.03) Non	Hawaiian/Pacific	sl.	1	0		1	0		2		Registered N	lurses	28	1.01
Total 2,122 0 104 43 2,269 Other Health Staff 174.03 Non-Health Staff 988.14 988.14	White		1,634	0	7	9	43		1,756		LPN's		278	8.50
Nursing Skilled Nursing Skilled Care Under 22 ICF/DD Care Totals Totals	Race Unknown		124	0		2	0		126				94	5.94
Nursing Skilled Care Under 22 ICF/DD Care Totals Totals 2723.62	Total		2,122	0	10	4	43		2,269					
Non-Hispanic 78 0 3 0 81												Staff	988	8.14
Hispanic 78			Nursing	Skilled		Sh	eltere	d			Totals		272	3.62
Non-Hispanic 1,897 0 101 43 2,041 Ethnicity Unknown 147 0 0 0 147 Total 2,122 0 104 43 2,269 NET REVENUE BY PAYOR SOURCE (Fiscal Year Data) Medicare Medicaid Other Public Private Insurance Private Pay TOTALS Care Expense as % of	ETHNICITY		Care	Under 2	2 ICF/E	D	Care	•	Totals					
Ethnicity Unknown 147 0 0 0 147 Total 2,122 0 104 43 2,269 NET REVENUE BY PAYOR SOURCE (Fiscal Year Data) Medicare Medicaid Other Public Private Insurance Private Pay TOTALS Care Expense as % of Expense as % of Expense 39.3% 39.3% 0.7% 6.9% 13.7% 100.0% Expense* Total Net Revenue	Hispanic		78	0	;	3	0		81					
Total 2,122 0 104 43 2,269 NET REVENUE BY PAYOR SOURCE (Fiscal Year Data) Medicare Medicaid Other Public Other	Non-Hispanic		1,897	0	10	1	43	:	2,041					
NET REVENUE BY PAYOR SOURCE (Fiscal Year Data) Charity Care Medicare Medicaid Other Public Private Insurance Private Pay TOTALS Care Expense as % of 39.3% 39.3% 0.7% 6.9% 13.7% 100.0% Expense* Total Net Revenue	Ethnicity Unknow	า	147	0	()	0		147					
Charity Care Medicare Medicaid Other Public Private Insurance Private Pay TOTALS Care Expense as % of 39.3% 39.3% 0.7% 6.9% 13.7% 100.0% Expense* Total Net Revenue	Total		2,122	0	104	4	43	:	2,269					
MedicareMedicaidOther PublicPrivate InsurancePrivate PayTOTALSCareExpense as % of39.3%39.3%0.7%6.9%13.7%100.0%Expense*Total Net Revenue					NET REVE	NUE BY	/ PAY	OR SC	URCE (I	Fiscal Yea	ar Data)			
39.3% 39.3% 0.7% 6.9% 13.7% 100.0% Expense* Total Net Revenue												Charity	Charity	Care
	Medicare	N	/ledicaid	Other F	Public Pr	ivate Ins	suranc	e	Private F	Pay	TOTALS	Care	Expense a	s % of
67,584,567 67,582,152 1,269,280 11,954,500 23,617,523 172,008,022 146,910 0.1%	39.3%		39.3%		0.7%		6.99	%	13	3.7%	100.0%	Expense*	Total Net I	Revenue
	67,584,567		67,582,152	1,269	,280	11,98	54,500)	23,617,	523	172,008,022	146,910	0	.1%

Reported Identified Offenders	22	Total Residents Diagnosed with Mental Illness
LICENSED BEDS, E	BEDS IN USE, MED	ICARE/MEDICAID CERTIFIED BEDS

		,		•						
	LICENSED	PEAK BEDS	PEAK BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	ADMISSIONS AND DISCHARGES - 201	
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED		
Nursing Care	500	500	421	500	380	120	430	466	Residents on 1/1/2015	372
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2015	529 524
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2015 Residents on 12/31/2015	521 380
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	360
TOTAL BEDS	500	500	421	500	380	120	430	466	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

	Medi	icare	Medi	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	9,171	5.8%	42,030	24.7%	43	636	32,117	2,162	86,159	47.2%	47.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	9,171	5.8%	42,030	24.7%	43	636	32,117	2,162	86,159	47.2%	47.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	6	5	0	0	0	0	0	0	6	5	11
45 to 59	27	28	0	0	0	0	0	0	27	28	55
60 to 64	7	14	0	0	0	0	0	0	7	14	21
65 to 74	18	31	0	0	0	0	0	0	18	31	49
75 to 84	28	64	0	0	0	0	0	0	28	64	92
85+	26	126	0	0	0	0	0	0	26	126	152
TOTALS	112	268	0	0	0	0	0	0	112	268	380

180

LEVEL	IDENIO D	Y PAYMENT	Other	E AND LEV	Private	C harit	hv		AVED A	SE DAILY PA	VMENT DA	TES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	,	ALS	LEVEL OF C			DOUBLE
Nursing Care	32	231	0	0	117	0	3	880	Nursing Ca	re	169	192
Skilled Under 22	0	0	0	0	0	0		0	Skilled Und	er 22	0	0
ICF/DD		0	0	0	0	0		0	Intermediat	e DD	0	0
Sheltered Care			0	0	0	0		0	Shelter		0	0
TOTALS	32	231	0	0	117	0	3	880				
	RESIDEN	ITS BY RAC	IAL/ETHI	NICITY GRO	UPING					STAFFING		
		Nursing	Skilled		Shelte				EMPLOYM		FULL-TII	
RACE		Care	Under 2	2 ICF/DI	O Car	e	Totals		CATEGO	RY	EQUIVAL	ENT.
Asian		0	0	0		0	0	_	Administrators	S	;	5.00
American Indian		0	0	0		0	0		Physicians		(0.00
Black		8	0	0		0	8		Director of Nu	rsing	Į.	5.00
Hawaiian/Pacific I	sl.	0	0	0		0	0		Registered No	ırses	2	7.00
White		372	0	0		0	372		LPN's		43	3.00
Race Unknown		0	0	0		0	0		Certified Aide	S	118	3.00
Total		380	0	0		0	380	_	Other Health		18	3.00
									Non-Health S	taff	118	5.00
		Nursing	Skilled		Shelte	ered			Totals		33	1.00
ETHNICITY		Care	Under 2	2 ICF/DI	O Cai	re	Totals					
Hispanic		6	0	0		0	6	_				
Non-Hispanic		374	0	0		0	374					
Ethnicity Unknown	า	0	0	0		0	0					
Total		380	0	0		0	380	_				
				NET REVE	NUE BY P	AYOR S	SOURCE	(Fiscal Ye	ear Data)			
										Charity	Charity	Care
Medicare	N	1edicaid	Other F	Public Pri	vate Insura	ance	Private	e Pay	TOTALS	Care	Expense a	ıs % of
32.0%		21.7%		0.0%	35	.0%	•	11.3%	100.0%	Expense*	Total Net I	Revenue
17,120,609		11,602,670	10	,999	18,763,1	185	6,039	9,662	53,537,125	152,744	0.	.3%

Source:Long-Term Care Facility Questionnaire for 2015, Illinois Department of Public Health, Health Systems Development

HEALTH SERVICE AREA	010	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	1	DIAGNOSIS	
TOTAL FACILITIES	2	Chronic Alcoholism	0	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	1	Endocrine/Metabolic	0
FREE STANDING FACILITIES	2	Drug Addiction	1	Blood Disorders	0
		Medicaid Recipient	0	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	0	Alzheimer Disease	0
NURSING CARE BEDS ONLY	2	Mental Illness	1	Mental Illness	0
DD CARE BEDS ONLY	0	Non-Ambulatory	0	Developmental Disability	0
MULTI-LICENSED FACILITIES	0	Non-Mobile	0	Circulatory System	0
		Public Aid Recipient	0	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	0	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	2	Skin Disorders	0
NON-PROFIT OWNERSHIP	1	Infectious Disease w/ Isolation	1	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	1	Other Restrictions	1	Injuries and Poisonings	0
		No Restrictions	0	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	0			Non-Medical Conditions	0
LIFE CARE FACILITY	0			TOTALS	0
				*Data Not Collected for 2015	
Reported Identified Offenders	0	Total Residents	Diagnosed	I with Mental Illness	2

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2015	
Nursing Care	172	165	148	165	113	59	80	172	Residents on 1/1/2015 Total Admissions 2015	112 102
Skilled Under 22 Intermediate DD	0 0	0 0	0 0	0 0	0	0 0		0 0	Total Discharges 2015	101
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	113
TOTAL BEDS	172	165	148	165	113	59	80	172		

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

		icare	Medi		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	477	1.6%	23,766	37.9%	0	0	15,254	0	39,497	62.9%	65.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	477	1.6%	23,766	37.9%	0	0	15,254	0	39,497	62.9%	65.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	1	0	0	0	0	0	0	1	1	2
45 to 59	3	0	0	0	0	0	0	0	3	0	3
60 to 64	2	3	0	0	0	0	0	0	2	3	5
65 to 74	9	11	0	0	0	0	0	0	9	11	20
75 to 84	11	19	0	0	0	0	0	0	11	19	30
85+	8	45	0	0	0	0	0	0	8	45	53
TOTALS	34	79	0	0	0	0	0	0	34	79	113

Totals

105.06

RESI	IDENTS B	Y PAYMEN	SOURC	E AND LEVI	EL OF CA	RE				
LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT I	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	2	67	0	0	44	0	113	Nursing Care	149	136
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	2	67	0	0	44	0	113			
	RESIDE	NTS BY RAC	IAL/ETH	NICITY GRO	UPING			STAFF	ING	
RACE		Nursing Care	Skilled Under 2	2 ICF/DE	Shelte Cai		Totals	EMPLOYMENT CATEGORY	FULL- EQUIV	
Asian		0	0	0		0	0	Administrators		2.00
American Indian		0	0	0		0	0	Physicians		0.00
Black		1	0	0		0	1	Director of Nursing		2.00
Hawaiian/Pacific Is	sl.	0	0	0		0	0	Registered Nurses		6.75
White		112	0	0		0	112	LPN's		18.40
Race Unknown		0	0	0		0	0	Certified Aides		43.80
Total		113	0	0		0	113	Other Health Staff		0.00
			· ·	· ·		-		Non-Health Staff		32.10

ETHNICITY	Care	Under 22	ICF/DD	Care	Totals
Hispanic	2	0	0	0	2
Non-Hispanic	111	0	0	0	111
Ethnicity Unknown	0	0	0	0	0
Total	113	0	0	0	113

						Charity	Charity Care
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Care	Expense as % of
5.3%	48.8%	0.0%	0.3%	45.6%	100.0%	Expense*	Total Net Revenue
292,123	2,689,951	0	17,152	2,515,279	5,514,505	0	0.0%

^{*}Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA		010	=		N RESTRICTION	ONS	7	RESIDENTS BY PRIMARY DIAG	NOSIS*
TOTAL FACULTIES		40		sive/Anti-			7	DIAGNOSIS	•
TOTAL FACILITIES		12		c Alcoholis			7	Neoplasms	0
HOSPITAL BASED UNITS		1		pmentally	Disabled		4	Endocrine/Metabolic	0
FREE STANDING FACILITIES		11	•	ddiction			8	Blood Disorders	0
				aid Recipie			1	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:			Medica	are Recipie	ent		2	Alzheimer Disease	0
NURSING CARE BEDS ONL	_Y	9	Mental	Illness			2	Mental Illness	0
DD CARE BEDS ONLY		2	Non-A	mbulatory			0	Developmental Disability	0
MULTI-LICENSED FACILITI	ES	1	Non-M	obile			0	Circulatory System	0
			Public	Aid Recipi	ent		0	Respiratory System	0
FACILITIES REPORTED BY			Under	65 Years	Old		0	Digestive System	0
OWNERSHIP TYPE			Unable	to Self-M	edicate		0	Genitourinary System Disorders	0
GOVERNMENTAL OWNERS	SHIP	1	Ventila	tor Depen	dent		10	Skin Disorders	0
NON-PROFIT OWNERSHIP		5	Infection	ous Diseas	se w/ Isolation		2	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP		6	Other	Restriction	S		1	Injuries and Poisonings	0
			No Re	strictions			0	Other Medical Conditions	0
CONTINUING CARE COMMUNI	TY	1					Ū	Non-Medical Conditions	0
LIFE CARE FACILITY		2						TOTALS	0
								*Data Not Collected for 2015	
Reported Identified Offender	s	14			Total F	Residents Diag	nosed	d with Mental Illness	182
LICENSED E	BEDS, BE	DS IN USE	E, MEDICA	ARE/MEDI	CAID CERTIFII	ED BEDS			
	PEAK	PEAK						ADMISSIONS A	ND
LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEI	DICAID DISCHARGES - 2	2015

FACILITY UTILIZATION - 2015

IN USE

965

0

32

15

1,012

LEVEL OF CARE

Skilled Under 22

Intermediate DD

Sheltered Care

TOTAL BEDS

Nursing Care

BEDS

1,219

0

32

28

1,279

SET-UP

1,209

0

32

28

1,269

USED

1,063

0

32

25

1,120

SET-UP

1,209

0

32

28

1,269

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

BEDS

254

0

0

13

267

CERTIFIED

954

954

CERTIFIED

1002

0

32

1034

	Med	icare	Medio	caid	Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days (Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	58,622	16.8%	183,227	50.1%	2,778	12,432	95,864	503	353,426	79.4%	80.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,551	98.9%	0	0	0	0	11,551	98.9%	98.9%
Sheltered Care					0	0	6,887	0	6,887	67.4%	67.4%
TOTALS	58,622	16.8%	194,778	51.6%	2,778	12,432	102,751	503	371,864	79.7%	80.3%

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	5	0	0	4	5	0	0	6	10	16
45 to 59	42	38	0	0	7	7	0	0	49	45	94
60 to 64	24	23	0	0	4	1	0	0	28	24	52
65 to 74	59	96	0	0	1	2	0	0	60	98	158
75 to 84	98	139	0	0	0	1	4	1	102	141	243
85+	90	349	0	0	0	0	0	10	90	359	449
TOTALS	315	650	0	0	16	16	4	11	335	677	1.012

1,037

2,889

2,916

1,010

Residents on 1/1/2015

Total Admissions 2015

Total Discharges 2015

Residents on 12/31/2015

26,398,553

26,632,216

248,648

*Charity Expense does not include expenses which may be considered a community benefit.

122111010 20110				, (22112) (,		2.0.2,40			
RES	SIDENTS B	Y PAYMENT	SOURCE	AND LE	EL OF CAF	RE				
LEVEL			Other		Private	Charity		AVERAGE DAILY	PAYMENT F	RATES
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	187	497	19	28	234	0	965	Nursing Care	281	254
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		32	0	0	0	0	32	Intermediate DD	0	126
Sheltered Care			0	0	15	0	15	Shelter	181	160
TOTALS	187	529	19	28	249	0	1,012			
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GR	OUPING			STAFF	ING	
		Nursing	Skilled		Shelter			EMPLOYMENT	FULL-	
RACE		Care	Under 22	l ICF/D	D Care	е -	Γotals	CATEGORY	EQUIV	ALENT
Asian		3	0	:	2	0	5	Administrators		10.50
American Indian		1	0	()	0	1	Physicians		0.20
Black		71	0		5	0	76	Director of Nursing		11.00
Hawaiian/Pacific	Isl.	0	0	()	0	0	Registered Nurses		92.23
White		866	0	2	5 1	5	906	LPN's	1	42.99
Race Unknown		24	0	(0	0	24	Certified Aides	4	174.61
Total		965	0	3:	2 1	5	1,012	Other Health Staff		59.70
								Non-Health Staff	2	256.66
		Nursing	Skilled		Shelte	red		Totals	10	47.89
ETHNICITY		Care	Under 22	2 ICF/D			Totals			
Hispanic		42	0		2	0	44			
Non-Hispanic		824	0	30		15	869			
Ethnicity Unknow	'n	99	0	()	0	99			
Total		965	0	32	2 1	15	1,012			
			ı	NET REVE	NUE BY PA	YOR SC	URCE (Fiscal Y	/ear Data)		
								Charity	, Chari	ty Care
Medicare	N	/ledicaid	Other P	ublic Pr	ivate Insura	nce	Private Pay	TOTALS Care		as % of
33.0%		33.3%	(0.3%	7.	1%	26.2%	100.0% Expens	•	t Revenue

5,697,233

20,919,508

79,896,158

108,053

0.1%

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2019	5
Nursing Care	357	356	291	356	263	94	165	356	Residents on 1/1/2015 Total Admissions 2015	363
Skilled Under 22	0	0	0	0	0	0		0		340
Intermediate DD	83	83	76	83	74	9		83	Total Discharges 2015	367
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	336
TOTAL BEDS	440	439	367	439	337	103	165	439	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Med	licaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	9,095	15.1%	50,256	38.7%	538	335	38,299	0	98,523	75.6%	75.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			22,769	75.2%	0	0	0	0	22,769	75.2%	75.2%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	9,095	15.1%	73,025	45.6%	538	335	38,299	0	121,292	75.5%	75.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	INDER 22	INTER	RMED. DD	SHEI	_TERED	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	11	13	0	0	11	13	24
45 to 59	4	2	0	0	15	13	0	0	19	15	34
60 to 64	4	2	0	0	4	7	0	0	8	9	17
65 to 74	12	15	0	0	4	5	0	0	16	20	36
75 to 84	31	50	0	0	1	0	0	0	32	50	82
85+	34	109	0	0	1	0	0	0	35	109	144
TOTALS	85	178	0	0	36	38	0	0	121	216	337

LEVEL	DE. 110 D	SY PAYMENT	Other			-	- Charity			AVED A	GE DAILY PA	VMENT DA	TEC
	Medicare	Medicaid	Public	Insuranc		Pay	Care	TOTALS	S	LEVEL OF C			DOUBLE
Nursing Care	26	136	0	5		96	0	263		Nursing Ca	re	200	154
Skilled Under 22	0	0	0	0		0	0	0		Skilled Und		0	0
ICF/DD		74	0	0		0	0	74		Intermediat		182	184
Sheltered Care			0	0		0	0	0		Shelter		0	0
TOTALS	26	210	0	5		96	0	337	_				
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY G	ROUP	ING					STAFFING		
		Nursing	Skilled			Sheltere				EMPLOYM		FULL-TII	
RACE		Care	Under 22	2 ICF/	DD	Care	7	otals		CATEGO	PRY	EQUIVAL	ENT
Asian		1	0		0	0		1		Administrator	s	į	5.50
American Indian		1	0		0	0		1		Physicians		(0.10
Black		1	0		15	0		16		Director of Nu	ırsing	į	5.00
Hawaiian/Pacific I	sl.	0	0		0	0		0		Registered Nurses		31.12	
White		260	0		59	0		319		LPN's		49.88	
Race Unknown		0	0		0	0		0		Certified Aide		144.03	
Total		263	0		74	0		337		Other Health		7.50	
									_	Non-Health S	taff		5.93
		Nursing	Skilled			Sheltere	ed			Totals		380	0.06
ETHNICITY		Care	Under 2	2 ICF	'DD	Care	-	Γotals					
Hispanic		0	0		0	0)	0					
Non-Hispanic		263	0	-	74	0		337					
Ethnicity Unknown	ı	0	0		0	0		0					
Total		263	0		74	0	1	337					
				NET REV	ENUE	BY PAY	OR SO	URCE (Fi	iscal Year Da	ta)		<u></u>	
											Charity	Charity	Care
Medicare	ľ	Medicaid	Other F	ublic F	Private	Insuran	ce	Private Pa	ay	TOTALS	Care	Expense a	s % of
21.0%		54.7%		0.0%		0.69	%	23.7	7%	100.0%	Expense*	Total Net I	Revenue
5,155,300		13,421,055		0		140,65	2	5,823,6	18 2	24,540,625	0	0.	0%

	LICENSED	BEDS, BE	DS IN US	E, MEDICA	KE/MEDI	CAID CERTIFIE	ED BEDS			
		PEAK	PEAK						ADMISSIONS AN	D
	LICENSED	BEDS	BEDS	BEDS	BEDS	AVAILABLE	MEDICARE	MEDICAID	DISCHARGES - 20	015
LEVEL OF CARE	BEDS	SET-UP	USED	SET-UP	IN USE	BEDS	CERTIFIED	CERTIFIED	D '- 4 4 004 F	0.040
Nursing Care	2,216	2,045	1,804	2,031	1,588	628	1382	1791	Residents on 1/1/2015 Total Admissions 2015	2,040
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2015	4,562 4.540
Intermediate DD	508	496	464	496	454	54		487	Residents on 12/31/2015	2,062
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2015	2,002
TOTAL BEDS	2,724	2,541	2,268	2,527	2,042	682	1382	2278		

	Med		Medic		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	79,141	15.7%	302,126	46.2%	6,409	23,201	166,862	19,080	596,819	73.8%	80.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			158,074	88.9%	0	0	4,440	0	162,514	87.6%	89.8%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	79,141	15.7%	460,200	55.3%	6,409	23,201	171,302	19,080	759,333	76.4%	81.9%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECI	EMBER 31, 20	15		
	NURSIN	IG CARE	SKL U	INDER 22	INTER	MED. DD	SHEL	TERED	TO	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	7	7	0	0	110	83	0	0	117	90	207
45 to 59	56	49	0	0	62	54	0	0	118	103	221
60 to 64	50	56	0	0	29	30	0	0	79	86	165
65 to 74	105	129	0	0	52	17	0	0	157	146	303
75 to 84	138	266	0	0	12	1	0	0	150	267	417
85+	154	571	0	0	3	1	0	0	157	572	729
TOTALS	510	1,078	0	0	268	186	0	0	778	1,264	2,042

121,055

0.1%

138,930,645

35,849,407

59,748,498

844,983

*Charity Expense does not include expenses which may be considered a community benefit.

LEVEL			Other		Private	Charity		AVERAGE DA	LY PAYME	NT RATE	S
OF CARE	Medicare	Medicaid	Public II	nsurance	Pay	Care	TOTALS	LEVEL OF CARE	SIN	GLE DOI	JBLE
Nursing Care	221	841	17	48	454	2	1,583	Nursing Care	;	344	323
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22		0	0
ICF/DD		442	0	0	12	0	454	Intermediate DD		122	144
Sheltered Care			0	0	0	0	0	Shelter		0	0
TOTALS	221	1,283	17	48	466	2	2,037				
	RESIDE	NTS BY RAC	IAL/ETHNI	CITY GRO	UPING			STA	FFING		
		Nursing	Skilled		Shelter			EMPLOYMENT		ULL-TIME	
RACE		Care	Under 22	ICF/DD	Care	Э	Totals	CATEGORY	E	QUIVALEN	Т
Asian		1	0	1		0	2	Administrators		38.81	
American Indian		2	0	0		0	2	Physicians		5.50)
Black		131	0	37		0	168	Director of Nursing		26.50)
Hawaiian/Pacific I	sl.	0	0	2		0	2	Registered Nurses		162.49	
White		1,450	0	414		0	1,864	LPN's		268.18	}
Race Unknown		4	0	0		0	4	Certified Aides		972.97	•
Total		1,588	0	454		0	2,042	Other Health Staff		241.80)
								Non-Health Staff		527.11	
		Nursing	Skilled		Shelte	red		Totals		2243.35	,
ETHNICITY		Care	Under 22	ICF/DD	Car	е	Totals				
Hispanic		8	0	5		0	13				
Non-Hispanic		1,580	0	449		0	2,029				
Ethnicity Unknown	า	0	0	0		0	0				
Total		1,588	0	454		0	2,042				
			N	ET REVEN	UE BY PA	YOR SO	OURCE (Fiscal	l Year Data)			
								Cha	rity	Charity Car	е
Medicare	N	Medicaid	Other Pul	olic Priva	ate Insura	nce	Private Pay	TOTALS Ca	•	pense as %	
25.8%		43.0%	0.	6%	3.	4%	27.2%	100.0% Exp		tal Net Rev	

4,728,452

37,759,305

FACILITIES REPORTED BY Unable to Self-Medicate Genitourinary System Disorders **OWNERSHIP TYPE** 0 Ventilator Dependent **GOVERNMENTAL OWNERSHIP** 1 3 Skin Disorders 0 NON-PROFIT OWNERSHIP Infectious Disease w/ Isolation Musculo-skeletal Disorders 1 0 FOR PROFIT OWNERSHIP Other Restrictions 0 Injuries and Poisonings O Other Medical Conditions No Restrictions 0 **CONTINUING CARE COMMUNITY** 0 Non-Medical Conditions 0 **TOTALS** LIFE CARE FACILITY

Reported Identified Offenders 0

0

Total Residents Diagnosed with Mental Illness

*Data Not Collected for 2015

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 201	
Nursing Care Skilled Under 22	250	249	244	249	233	17	119	119	Residents on 1/1/2015 Total Admissions 2015	247 377
Intermediate DD Sheltered Care	16	16	16	16	16	0		16	Total Discharges 2015 Residents on 12/31/2015	375 249
TOTAL BEDS	266	265	260	265	249	17	119	135	-	

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Medi	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	10,069	23.2%	33,198	76.4%	0	214	39,714	0	83,195	91.2%	91.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,508	94.3%	0	0	0	0	5,508	94.3%	94.3%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,069	23.2%	38,706	78.6%	0	214	39,714	0	88,703	91.4%	91.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2015

	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEI	_TERED ´	T	OTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	3	2	0	0	3	2	5
45 to 59	3	1	0	0	5	6	0	0	8	7	15
60 to 64	2	3	0	0	0	0	0	0	2	3	5
65 to 74	4	14	0	0	0	0	0	0	4	14	18
75 to 84	18	44	0	0	0	0	0	0	18	44	62
85+	30	114	0	0	0	0	0	0	30	114	144
TOTALS	57	176	0	0	8	8	0	0	65	184	249

0

75

RES LEVEL	SIDENTS B	Y PAYMENT	CSOURC Other	E AND LE\			da.		AVED 4	SE DAILY DA	VACNT 5	ATEC
OF CARE	Medicare	Medicaid	Public	Insurance	Private Pay	Char Car	,	TALS	LEVEL OF C	SE DAILY PA Sare	AYMENI K SINGLE	DOUBLE
Nursing Care	31	84	0	1	117	()	233	Nursing Ca	re	210	175
Skilled Under 22	0	0	0	0	0	()	0	Skilled Und		0	0
ICF/DD		16	0	0	0	()	16	Intermediat	e DD	0	114
Sheltered Care			0	0	0	()	0	Shelter		0	0
TOTALS	31	100	0	1	117	()	249				
	RESIDE	NTS BY RAC	IAL/ETHI	NICITY GR	OUPING					STAFFING	i	
		Nursing	Skilled		Shelt				EMPLOYM		FULL-1	
RACE		Care	Under 22	2 ICF/D	D Ca	re	Totals		CATEGO	RY	EQUIVA	ALENT
Asian		3	0	()	0	3		Administrators	S		2.25
American Indian		0	0	(0	0	0		Physicians			1.00
Black		2	0	:	2	0	4		Director of Nu	rsing		2.00
Hawaiian/Pacific	lsl.	0	0	()	0	0		Registered Nu	ırses		16.25
White		228	0	1.	4	0	242		LPN's			21.00
Race Unknown		0	0	(0	0	0		Certified Aide	s		87.00
Total		233	0	10	6	0	249		Other Health			6.00
									Non-Health S	taff		71.00
		Nursing	Skilled		Shelt	ered			Totals		2	06.50
ETHNICITY		Care	Under 2	2 ICF/D	D Ca	are	Totals					
Hispanic		1	0	()	0	1					
Non-Hispanic		232	0	16	3	0	248					
Ethnicity Unknow	n	0	0	()	0	0					
Total		233	0	16	6	0	249					
				NET REVE	NUE BY F	AYOR	SOURC	E (Fiscal Ye	ear Data)			
										Charity	Charit	y Care
Medicare	N	Medicaid	Other F	Public Pr	ivate Insur	ance	Priva	te Pay	TOTALS	Care	Expense	as % of
28.4%		24.5%		0.1%	(0.6%		46.5%	100.0%	Expense*	Total Ne	t Revenue
5,133,704		4,429,063	10	,534	109	368	8,4	01,153	18,083,822	0		0.0%

HEALTH SERVICE AREA	011	ADMISSION RESTRICTIONS		RESIDENTS BY PRIMARY DIAGNO	OSIS*
		Aggressive/Anti-Social	15	DIAGNOSIS	
TOTAL FACILITIES	23	Chronic Alcoholism	6	Neoplasms	0
HOSPITAL BASED UNITS	0	Developmentally Disabled	3	Endocrine/Metabolic	0
FREE STANDING FACILITIES	23	Drug Addiction	13	Blood Disorders	0
		Medicaid Recipient	2	Nervous System Non Alzheimer	0
FACILITIES LICENSED FOR:		Medicare Recipient	3	Alzheimer Disease	0
NURSING CARE BEDS ONLY	18	Mental Illness	3	Mental Illness	0
DD CARE BEDS ONLY	3	Non-Ambulatory	1	Developmental Disability	0
MULTI-LICENSED FACILITIES	2	Non-Mobile	1	Circulatory System	0
		Public Aid Recipient	1	Respiratory System	0
FACILITIES REPORTED BY		Under 65 Years Old	3	Digestive System	0
OWNERSHIP TYPE		Unable to Self-Medicate	2	Genitourinary System Disorders	0
GOVERNMENTAL OWNERSHIP	0	Ventilator Dependent	20	Skin Disorders	0
NON-PROFIT OWNERSHIP	9	Infectious Disease w/ Isolation	4	Musculo-skeletal Disorders	0
FOR PROFIT OWNERSHIP	14	Other Restrictions	5	Injuries and Poisonings	0
		No Restrictions	2	Other Medical Conditions	0
CONTINUING CARE COMMUNITY	2			Non-Medical Conditions	0
LIFE CARE FACILITY	3			TOTALS	0
				*Data Not Collected for 2015	

77 LICENSED BEDS. BEDS IN USE. MEDICARE/MEDICAID CERTIFIED BEDS

Reported Identified Offenders

		,		_,						
LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AN DISCHARGES - 20	_
Nursing Care	2.251	2.183	1.798	2.142	1.630	621	1257	2045	Residents on 1/1/2015	1,843
Skilled Under 22	0	2,100	1,730	2,172	0	021	1237	2043	Total Admissions 2015	3,876
Intermediate DD	132	132	122	116	110	22		132	Total Discharges 2015	4,043
Sheltered Care	104	64	60	64	51	53			Residents on 12/31/2015	1,676
TOTAL BEDS	2,487	2,379	1,980	2,322	1,791	696	1257	2177	-	

Total Residents Diagnosed with Mental Illness

FACILITY UTILIZATION - 2015

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

					Other	Private	Private	Charity		Licensed	Peak Beds
	Med	icare	Medi	icaid	Public Pay	Insurance	Pay	Care	TOTAL	Beds	Set Up
LEVEL OF CARE	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	70,150	15.3%	370,379	49.6%	9,112	30,684	109,284	31,593	621,202	75.6%	78.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			41,428	86.0%	0	0	0	0	41,428	86.0%	86.0%
Sheltered Care					0	0	15,341	0	15,341	40.4%	65.7%
TOTALS	70,150	15.3%	411,807	51.8%	9,112	30,684	124,625	31,593	677,971	74.7%	78.1%

		RESIDE	NTS BY A	GE GROUP,	SEX AND L	EVEL OF CA	RE - DECE	MBER 31, 20	15		
	NURSIN	IG CARE	SKL U	NDER 22	INTER	RMED. DD	SHEL	TERED	TO	DTAL	GRAND
AGE GROUPS	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	26	12	0	0	25	18	0	0	51	30	81
45 to 59	105	93	0	0	19	18	0	0	124	111	235
60 to 64	63	60	0	0	12	6	0	0	75	66	141
65 to 74	120	146	0	0	4	6	2	1	126	153	279
75 to 84	130	238	0	0	1	1	3	3	134	242	376
85+	170	467	0	0	0	0	7	35	177	502	679
TOTALS	614	1,016	0	0	61	49	12	39	687	1,104	1,791

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	IDENTS E	BY PAYMENT		AND LE									
LEVEL			Other		Private	_	narity				GE DAILY PA		
OF CARE	Medicare	Medicaid	Public	Insurance	Pay	C	Care	TOTALS		LEVEL OF C	CARE	SINGLE [OOUBLE
Nursing Care	181	1,060	22	59	308		0	1,630		Nursing Ca	re	176	165
Skilled Under 22	0	0	0	0	0		0	0		Skilled Und	ler 22	0	0
ICF/DD		110	0	0	0		0	110		Intermediat	e DD	187	122
Sheltered Care			0	0	51		0	51		Shelter		134	129
TOTALS	181	1,170	22	59	359		0	1,791					
	RESIDE	NTS BY RAC	IAL/ETHN	IICITY GR	OUPING						STAFFING		
		Nursing	Skilled		Shelt					EMPLOYM		FULL-TII	
RACE		Care	Under 22	ICF/E	D Ca	are	T	otals		CATEGO	PRY	EQUIVAL	ENT
Asian		7	0		2	0		9	_	Administrator	s	22	2.58
American Indian		0	0)	0		0		Physicians		-	7.00
Black		417	0	2	6	1		444		Director of Nu	ırsing	22	2.00
Hawaiian/Pacific I	sl.	0	0		0	0		0		Registered Nurses		120	0.78
White		1,128	0	8	2	50	1	,260		LPN's		242	2.25
Race Unknown		78	0)	0		78		Certified Aide			3.07
Total		1,630	0	11	0	51	1	,791		Other Health			4.71
									_	Non-Health S	taff	596	5.45
		Nursing	Skilled		Shelt	ered				Totals		1963	3.84
ETHNICITY		Care	Under 22	2 ICF/E	D Ca	are	Т	otals					
Hispanic		3	0	()	0		3					
Non-Hispanic		1,257	0	11)	31	1	,398					
Ethnicity Unknown	า	370	0	()	20		390					
Total		1,630	0	11)	51	1	,791					
			N	NET REVE	NUE BY F	PAYO	R SO	URCE (Fiscal	Year Da	ta)			
											Charity	Charity	Care
Medicare	ı	Medicaid	Other Po	ublic Pi	ivate Insur	ance		Private Pay		TOTALS	Care	Expense a	s % of
16.9%		67.1%	1	1.4%	4	4.6%		10.1%		100.0%	Expense*	Total Net F	Revenue
34,689,507	,	138,067,122	2,891,	247	9,388	,031		20,758,185	20	05,794,092	277,427	0.	1%